POLICY HANDBOOK

As amended and approved by the Board of Trustees
June 2026

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INTRODUCTION

Each of the policies in this IPPF Policy Handbook represent a course of action adopted by the Board of Trustees *(previously Central Council and then Governing Council)* after appropriate consideration of the issues involved.

IPPF policies are intended to provide guidance to the whole Federation on a particular subject in order to assist future action by volunteers or staff.

IPPF policies should reveal the values and internationally accepted principles-of-best-practice that IPPF wishes to bring to bear on an issue.

IPPF policies are formulated in more general terms than a detailed programme of action and as such are not time-bound in the same way. IPPF policies should be expected to have a life expectancy of at least five years but all policies need to be periodically monitored by volunteers and staff to ensure their continued relevance.

IPPF policies sometimes require separate specific detailed procedures which although not part of the policy statement may be necessary to ensure implementation. These procedures can be revised by the IPPF Director-General as requested and must remain consistent with the policy.

All IPPF volunteers and staff should have access to an up-to-date list of IPPF's policies.

Responsibility for coordinating the drafting of IPPF policies and ensuring an up-to-date list of policies in the IPPF Policy Handbook lies with the Policy and Governance Unit in IPPF's London Office.

1. THE FEDERATION

Policy 1.1

1.1. AUTONOMY AND ACCOUNTABILITY

1. The Federation consists of Member Associations which have been admitted as full or associate members. The Member Associations of IPPF are autonomous entities.

2. IPPF is a federation of Member Associations which reach collective governance decisions, as members of IPPF, through the General Assembly. IPPF is divided into Regions for the purpose of sharing knowledge and bringing Member Associations closer to each other within their Regions and for better enabling support from and co-ordination by the Unified Secretariat.

3. By entering into membership with the IPPF an Association becomes eligible to certain privileges, but at the same time, voluntarily accepts to comply with the standards and responsibilities of membership as defined by the Board of the Trustees from time to time, and agrees to abide by the Act and Regulations, Procedural Byelaws and policies of IPPF.

4. IPPF recognizes its obligation to be programmatically and financially accountable to all its donors and other stakeholders while protecting the Federation's autonomy.

5. In order to protect the institutional name of "International Planned Parenthood Federation" and the name "Planned Parenthood", it is the policy that such names be used with initial capitals.

As adopted by Central Council, November 1990
Last amended by Governing Council, May 2020

1.2. VOLUNTEERING

Introduction

The dedicated commitment of volunteers is the base on which IPPF was founded and continues to be a major source of the Federation's strength and influence. This policy aims to ensure that the value of volunteerism is recognized throughout the Federation.

Definition

Volunteer: A volunteer undertakes a service or activity without pay for the benefit of the community, the environment, and persons other than close relatives or those within the household.[1]

Guiding Principles to Volunteering at IPPF

1. A volunteer in IPPF shares and upholds the Federation's mission, vision and values and offers his or her time, knowledge, skills, resources (financial, material, etc.) and experience free of charge to a Member Association and other levels of the Federation. Volunteers do so with the aim of making a difference to their community and improving the sexual and reproductive health, rights, and well-being of the people the Association exists to serve.

2. IPPF recognises volunteers as those involved at all levels of the Federation and in different capacities; including volunteers who are registered with MAs, those in governance roles and individuals participating in advisory roles, specific activities, or events in support of the Federation.

3. Most volunteers pay a nominal membership subscription to their Member Association which entitles them to participate in the democratic functioning of the organization. There are also volunteers who are willing to contribute their time and ideas without wishing to become a member formally. Elected member governing bodies provide leadership at all levels of the Federation in partnership with management.

4. The amount of time volunteers invest in the work of IPPF will depend upon their interest, the role they undertake and the needs of the Member Association. Some people will volunteer every day, some will volunteer for a few hours a week and some will volunteer for one-off events and activities. Some volunteers will wish to contribute their efforts at the local community level for example as peer educators, clinic volunteers, trainers, administrative support, advocates, or fundraising volunteers while others may wish to get elected to their governing body to influence policy-making and future programmes of work. Each volunteer, however, has a valued part to play no matter how big or small.

5. As a volunteer-based organization, IPPF is committed to expanding and developing its volunteer base through engaging volunteers in a meaningful way. This volunteer engagement includes effective youth participation and promotion of a youth centred approach at all levels.

6. Roles available to volunteers should provide a unique opportunity for them, besides learning about SRHR, the MA and IPPF, to learn about their community; to serve this community; to enlarge their social network; and to work for the fulfilment of

[1] ILO Manual on the measurement of volunteer work 2011

SRHR for all. This includes working with target groups using the rights-based approach.

7. Volunteers play a vital role in engaging and mobilizing activists to generate greater public support for SRHR issues.

Policy Implementation

IPPF Member Associations and Secretariat have various roles to play in the implementation of this policy.

8. In order to support Member Associations to develop their volunteer base and ensure that the value of volunteerism continues to be nurtured and recognised, IPPF volunteers and staff at all levels should:

    a. Ensure a positive image of the organization and its work in order to help in attracting prospective volunteers and appeal to them to contribute to its cause.
    b. Develop and promote throughout the Federation a global volunteer identity and movement whereby volunteers feel globally connected.
    c. Collaborate with other volunteer and international agencies and for example celebrate the International Volunteer Day as a means of strengthening IPPF's brand as a volunteer movement organization.
    d. Foster a culture throughout the Federation where volunteers are valued and recognised for their work.
    e. Enable processes and systems to support MAs to engage with their volunteers.
    f. Continue to engage young people as leaders at all levels of Federation volunteering including in governance.

9. To ensure that IPPF is able to continue in its mandate as a volunteer-based organization and engage volunteers in a meaningful, sustainable way for continued progress, all Member Associations should work to **attract, support, manage, develop, and retain** their volunteers through various means such as:

    a. Focus efforts on attracting, building the capacity of, and retaining effective volunteers as crucial elements to establishing a successful volunteer programme. Special focus should be placed on retaining young people who are moving into adulthood. This should be achieved through developing a structured and tailored process to attract new volunteers as well as providing regular opportunities, information, training, and development.
    b. Support volunteers and ensure their voices are heard through regular opportunities for feedback, consultation, supervision, and development.
    c. Ensure volunteers are given appropriate protection and support to enable them to carry out their duties safely and securely.
    d. Encourage and develop volunteers to take on leadership and governance responsibilities; encourage long term or alumni volunteers to mentor and support less experienced volunteers as a way of enhancing commitment to the MA and IPPF and offering more challenging opportunities to long term volunteers.

10. Encourage a diverse range of volunteers with different backgrounds and skills to play their part in the sexual and reproductive health and rights movement.

11. Demonstrate the added value of volunteering to the work of the Association by gathering regular volunteer feedback, documenting these results and sharing them on a regular basis with those volunteers who have helped to make the difference.

12. Where appropriate, cooperate with governments and/or advocate to create a favourable legal environment for volunteering in their country and abide by local and national legislation in respect of working with volunteers.

13. The IPPF Secretariat should use all available mechanisms in the Federation to regularly monitor the implementation of this policy and report to the appropriate governing body. The implementation of this policy should be adequately resourced and supported by the Secretariat.

As adopted by Central Council, November 1990
Last amended by Governing Council, May 2016

1.3. GENDER EQUALITY

Glossary of Terms

Anti-racism is the practice of actively identifying and opposing racism at an individual, social, institutional, and policy level.

Decoloniality means challenging and breaking away from colonial ways of thinking, knowing, and organising society, even after colonial rule has officially ended. It includes the rejection of Eurocentric ideas and valuing Indigenous knowledge systems, cultures, and perspectives that were suppressed by colonialism.

Feminist principles refer to foundational guidelines that underpin feminist movements and ideologies. They aim to dismantle patriarchal structures and promote gender equality by challenging existing power hierarchies, advocating for social justice, and fostering inclusive environments.

Gender refers to a social construct which places cultural and social expectations on individuals based on their sex assigned at birth. See also *Sex*.

Gender assessments or **gender audits** evaluate how gender equality is integrated into an organisation's infrastructure, budgets, processes, and policies. They are tools of gender mainstreaming, helping to identify gaps and challenges and recommend ways to improve gender equality in an organisation.

Gender budgeting and **resource allocation** is a practice that analyses and structures budgets, and allocates resources through a gender lens. This involves integrating gender considerations at all stages of the budgeting process and reallocating resources to address historical and systemic inequalities. It differs from traditional budgeting, which typically assumes gender neutrality and does not account for the differing impacts of policies on men, women, and gender-diverse people, such as unequal access to resources or unpaid care work.

Gender equality is the principle that all human beings, regardless of their sex, gender identity, or gender expression, are free to develop their abilities and make choices without the limitations set by stereotypes, rigid gender roles, or discrimination. It means that the different behaviours, aspirations, and needs of women, men, and gender-diverse people are considered, valued, and favoured equally.[1]

Gender inequality is understood to be one of the pervasive systems of oppression and exclusion that intersect with other systems of oppression such as (but not limited to) patriarchy, racism, sexism, colonialism, imperialism, ableism, ageism, homophobia, transphobia, classism, and casteism.

Gender justice is the transformative process of dismantling systemic power imbalances and intersecting forms of oppression that sustain gender inequality. It goes beyond achieving equal rights or opportunities by actively challenging and changing the policies, institutions, and social norms that reproduce discrimination and exclusion based on gender and its intersections with race, class, sexuality, ability, and colonial histories. Gender justice demands accountability from systems and actors that perpetuate injustice, ensuring that all people—regardless of their gender identity or expression—can live with dignity, autonomy, and equitable access to resources and decision-making. It is rooted in feminist, anti-racist, and decolonial principles that seek to redistribute power and create inclusive societies where no one is left behind.

Gender mainstreaming is a strategy to integrate a gender equality perspective at all stages and levels of policies and programmes, including in how the organisation itself works day to day.

[1]Adapted from IPPF Gender Equality Strategy 2018. https://www.ippf.org/resource/ippf-2017-gender-equality-strategy.

Gender non-binary recognises that gender identities fall within a broad spectrum beyond the binary classifications of men and women.

Gender-transformative approaches work toward achieving gender equality by challenging and transforming discriminatory systems and unequal power relations that underpin gender inequality. While **gender-sensitive**, **gender-aware**, and **gender-responsive** approaches are important for acknowledging that gender differences and inequalities exist, and for ensuring that programmes, policies, or interventions do not reinforce discrimination, they primarily adapt to gender dynamics rather than change them. In contrast, a Gender-Transformative approach (which underpins this policy) goes further by intentionally addressing and shifting harmful gender norms and power structures. For example, a GBV programme may be designed to ensure that all clients, regardless of gender, are included and supported. However, achieving long-term social change also requires confronting the root causes of violence, such as harmful gender stereotypes, through strategies like engaging boys and men in conversations around consent, accountability, and positive expressions of masculinity.

Intersectionality explains how different forms of oppression (such as racism, sexism, ageism, casteism, classism, homophobia, transphobia, etc.) overlap and create unique experiences of discrimination.[2] These different oppressions and identities are interconnected and cannot be examined in isolation. For example, the multiple identities of a Black woman living with HIV and a disability affect the way she is treated in society and how she accesses social, legal, and SRH services.[3]

LGBTI; LGBTIQ+; LGBTIQA+ are inclusive acronyms for Lesbian, Gay, Bisexual, Trans, Intersex, Queer or Questioning, and Asexual identifying people. The "+" plus sign includes those who may not identify within the other categories. LGBTIQ+ includes terms that many view as Western or Eurocentric, and may not capture the diverse indigenous identities and terms used outside of the English language and before colonisation (including but not limited to: hijra, meti, lala, skesana, motsoalle, mithli, kuchu, kawein, travesti, muxé, fa'afafine, fakaleiti, hamjensgara, brotherboy, and sistergirl). See also *SOGIESC*.

Sex is the classification of a person as male or female. Sex is assigned at birth and often recorded in an official document, such as a birth certificate. It is usually based on the appearance of their external anatomy and on a binary perspective of sex, which excludes intersex people. In reality, a person's sex, however, is a combination of multiple sex characteristics: chromosomes, hormones, internal and external reproductive organs, and secondary sex characteristics. See also *Gender*.

SOGIESC is an acronym for 'Sexual Orientation, Gender Identity, Gender Expression, and Sex Characteristics'. The policy uses this term instead of LGBTIQ+. SOGIESC is more accurate because everyone has a sexual orientation, a gender identity and expression, and sex characteristics. SOGIESC offers a reframing of sexuality and gender that is more inclusive and more universal. It shifts the focus away from specific populations and toward shared traits that everyone can relate to, but which are usually used as grounds of discrimination.

SRHRJ is an acronym for 'Sexual and Reproductive Health Rights and Justice'. An SRHRJ approach aims to ensure that everyone can make safe, informed choices about their bodies and relationships while addressing the inequalities that prevent access to these rights and services. The inclusion of "Justice" in SRHRJ emphasises the need to tackle systemic barriers and discrimination faced by those who are often excluded or disadvantaged. By focusing on justice, SRHRJ goes beyond providing services to actively dismantling inequalities. It promotes a fair and inclusive approach to sexual and reproductive health where no one is left behind.

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[2] The term was coined by Kimbery Crenshaw in 1989. In *Demarginalizing the Intersection of Race and Sex* (1989) she explained intersectionality as "A lens through which you can see where power comes and collides, where it interlocks and intersects. It's not simply that there's a race problem here, a gender problem here, and a class or LGBTQ+ problem there. Many times, that framework erases what happens to people who are subject to all of these things." University of Chicago Legal Forum, 1989(1), 139-167.

[3] Adapted from IPPF Gender Equality Strategy 2018. https://www.ippf.org/resource/ippf-2017-gender-equality-strategy.

1. Preamble

IPPF affirms its commitment to gender equality as a foundational component of universal human rights.

IPPF defines gender equality as the principle that all human beings—regardless of their sex, gender identity, or gender expression—are free to develop their personal abilities and make choices without the limitations set by stereotypes, rigid gender roles, or discrimination. It means that the different behaviours, aspirations, and needs of women, girls, men, boys, and gender-diverse people are equally considered, valued, and supported.

As an organisation working towards sexual and reproductive health rights and justice (SRHRJ) for all, our commitment to gender equality comes from our core belief that all people are entitled to make informed choices about their bodies and develop their abilities and live in dignity. It demands transformative action rooted in intersectional gender and reproductive justice, and grounded in feminist, decolonial approaches. It means we must work to dismantle structural inequalities and systemic barriers to gender equality and address the power dynamics that prevent this. The Federation must work to address these matters systemically.

Therefore, the purpose of the Gender Equality Policy (the Policy) is to help strengthen the Federation's positionality as a rights-based, anti-racist and gender-transformative organisation, to uphold its commitment to feminist principles and to enable it to better counter the growing global push back against gender equality.

This Policy is grounded in an anti-racist and decolonial framework. It is shaped by global resistance and internal concerns, recognising that the Federation operates in a world where rights are threatened daily due to anti-rights movements, rising authoritarianism, and by our own internal challenges and the growing need for organisational resilience.

The Policy aims to strengthen our resolve as a Federation. It acknowledges and seeks to meet the challenges of upholding human rights principles and values in the face of State and International policies that reinforce oppression as the status quo. It seeks to ensure that our understanding of gender and gender equality keeps pace with advances in human rights understandings. It calls for creation of space to celebrate and defend gender in all its diversities. It commits us to tackling the persistent levels of sexual and gender-based violence against women, girls and people with diverse sexual orientation, gender identity, gender expression and sex characteristics (SOGIESC). It recognises the role of men and boys as a part of the solution and it aims to ensure that the rights, needs and experiences of the Federation's people (those whose use our services, our volunteers, staff and partners) in all their intersectional diversity are considered in all policies, processes, and in how we work together.

The Policy builds on the efforts of those who came before us. The Federation stands in solidarity with the long history of struggle for gender equality led by gender justice activists, feminists, collectives, and other organisations. They paved the path for us to take the next steps towards a more equal and just collective future.

2. Mandate

Through a series of guiding principles set out below, the Policy reflects the Federation's commitment to advancing gender equality, equity, and justice as well as the actions necessary to realise the goal.

This Policy applies to the entire Federation, including Member Associations (MAs) and the Secretariat. It applies to all policies and programmes, initiatives service delivery and advocacy activities. In particular:

2.1. MAs are encouraged to use the Policy as a guide and framework for development or updating of their own gender equality policies, in keeping with their country's context and local laws;

2.2. MAs are not obliged to immediately implement the Policy comprehensively; However, MAs are obliged to discontinue any action or practice that works against the spirit of the Policy and the principles (below) that underpin it.

2.3. The Policy will be reviewed and updated in 2030.

3. Guiding Principles

Implementation of the Policy, which is founded on and reinforces IPPF's commitment to SRHRJ, shall be guided by the following principles:

i. **Taking a gender transformative approach:** IPPF recognises that women, girls, and people with diverse SOGIESC identities continue to be subjected to systemic, structural, and institutional discrimination, leading to violations of their sexual and reproductive health and rights. IPPF, being committed to SRHRJ, moves beyond depoliticised framings of gender that reduce gender to individual identity or expression. Instead, gender must be recognised as a structural system of power that perpetuates oppression and inequality. Understanding that gender inequality involves a structural system of power that perpetuates oppression and inequality, IPPF adopts a gender-transformative approach, integrating principles of gender equity and gender justice so that it also works to dismantle systemic discrimination and structural barriers to gender equality.

ii. **Acknowledging and celebrating diverse SOGIESC:** IPPF recognises that acknowledgement and celebration of diverse SOGIESC are integral to realisation of human rights for all. IPPF is committed to working for a world where all people are free to enjoy their sexuality and express themselves without fear of violence or discrimination. We uphold this both within the Federation and in all persons' interactions with the Federation. It means inclusivity, equality, and respect for diverse SOGIESC must be integrated into all aspects of IPPF work.

iii. **Recognising and valuing intersectionalities in both identities and realities:** IPPF believes that a comprehensive inclusive view of SRHRJ obliges careful consideration of how interactions between different social determinants affect access to sexual and reproductive health services. Intersectionality promotes that considers. To ensure equal outcomes, not just equal opportunities, our focus on intersectionality moves beyond numbers alone. We work for meaningful respect for, representation and participation by, and inclusion of the perspectives of, intersectional identities, including women, girls, and people with diverse SOGIESC ensuring that gender equality. We intentionally integrate intersectionality into all youth engagement and empowerment efforts. IPPF further works to build equal and equitable systems and structures that protect the rights of all individuals, particularly those who face multiple forms of discrimination. We uphold bodily autonomy for all as an essential part of gender justice and SRHRJ.

iv. **Upholding and embedding our commitment to:**

   a. **Anti-racism and de-colonisation:** IPPF further acknowledges and critically reflects on the reality that its work for SRHRJ, like international aid itself, takes place under contexts of ongoing racism and colonialism. We recognise that racism intersects with gender discrimination to create compounded disadvantages. We will critically examine and work to dismantle the racist and colonial legacies and Eurocentrism that have shaped and continue to shape contemporary understandings of gender, gender identity, gender expression and sexuality. Our anti-racist and decolonial approaches to gender justice must be informed by feminist decolonial practices that critically examine and dismantle colonial power structures in gender narratives and frameworks. We must challenge the notion that frameworks developed by the Global North are necessarily universally applicable.

   b. **Intergenerational dimensions:** IPPF believes in an intergenerational approach to SRHRJ that includes, but goes beyond addressing the needs of all age groups. We consider the ways in which perceptions and stereotypes about age intersect with sexuality and gender stereotypes across the age spectrum. Additionally, IPPF recognises that intergenerational collaboration

brings together diverse perspectives, combining the wisdom and creative energy of different ages and stages within our movement.

c. **Disability justice:** IPPF recognises the rights of individuals with disabilities to equitable access to SRHRJ programmes, information, and services that respect their confidentiality and dignity. This means being inclusive of all forms of disabilities (visible and invisible, short-term and long-term) and examining disability and ableism as interconnected with other systems of oppression. We acknowledge the multi-layered systems that affect women and girls with disabilities and the gendered nature of the ableist realities they face. We underscore the right of every individual to make informed decisions about their bodies, sexuality, and reproductive health free from coercion, discrimination, and violence.

d. **Recognising men and boys as SRHRJ allies:** IPPF is committed to engaging men and boys as allies in gender equality work. We recognise they have an invaluable contribution to make in challenging patriarchal systems and structures that privilege men across all levels, while acknowledging the history and ongoing realities of men as perpetrators of violence, particularly against women and girls. Engaging men and boys as allies and partners means challenging traditional gender norms that perpetuate inequality, dismantling harmful masculinities, promoting positive masculinities alongside promoting accountability-based approaches to women, girls, and people with diverse SOGIESC. We also acknowledge and consider the needs of men and boys in their diversity who are recipients of services and also face backlash as a result of patriarchal and other stereotypes. We actively avoid approaches to engaging men that promote the de-politicisation of gender equality work, fail to address the root causes of patriarchal and social norms, or which frame gender inequality as a matter of individual violence.

v. **Freedom from harassment and violence:** IPPF upholds its duty of care to ensure that in their interactions with and for the Federation, all persons – including clients, volunteers, staff, partners, and other rights holders—are free from all forms of sexual and gender-based harassment and violence (SGBV). This includes institutional and systemic forms of violence, including medical violence, reproductive coercion, and violence because of policy neglect. We further note how SGBV intersects with other forms of violence, disproportionately affecting and targeting women, girls, and people with diverse SOGIESC. We highlight the integral linkages between freedom from harassment and violence and individual and collective physical and mental well-being.

vi. **Upholding gender equality in humanitarian emergencies:** IPPF recognises that in the contexts of acute and protracted emergencies there are increased SRHRJ needs, heightened risks of SGBV and impeded access to services and support. IPPF further recognises that historically the rapid-pace decision-making and unaddressed biases of humanitarian actors have seen gendered inequalities replicated in emergency response, have added or left unaddressed the risks of sexual exploitation and abuse (SEA), furthered the exclusion of minoritised persons and left local responders and organisations out of decision-making processes. During its humanitarian response, IPPF commits to upholding gender equality across its client services and programmes, in its workforce recruitment and retention policies and practices, and in its coordination with partners. The Federation commits to ensuring equal treatment of all women, girls, and persons with diverse SOGIESC, considering their gender and intersecting identities, and applying an intersectional lens to identify needs and guide humanitarian action.

vii. **Safeguarding against institutional backlash and anti-rights narratives:** IPPF is gravely concerned at the escalating threats posed globally by well-funded and organised anti-gender actors and organisations that attack the rights to bodily autonomy of women, girls and people with diverse SOGIESC identities, seeking to

dismantle universal protections for gender equality, sexual and reproductive health rights and justice (SRHRJ), and erode democratic principles. We recognise their tactics, such as disinformation, legislative manipulation, and direct violence to undermine progress on rights of people with diverse SOGIESC, women's autonomy, and are intended to end inclusive policies. We understand our responsibility to protect recipients of our services, our volunteers, staff, and partners from these threats.

viii. **Strengthening feminist leadership and organisational culture:** IPPF affirms that feminist approaches to organizational life, systems and leadership is not merely about achieving gender parity in representation. Rather, it involves fundamentally transforming organisational power relations, decision-making processes, and institutional cultures. Rooting its work in intersectional feminist values, IPPF prioritises dismantling patriarchal structures across the Federation and within its entities, redistributing power equitably, and fostering environments where all individuals thrive.

ix. **Enabling continuous learning and accountability:** IPPF reaffirms its commitment as a Federation to continuous learning and accountability. This includes developing mechanisms for ongoing evaluation, adaptation, and responsiveness to diverse populations. We will prioritise engaging communities in monitoring and evaluation to enhance accountability, establishing channels for community feedback, and adapting our strategies, plans, and priorities based on that feedback and other emerging evidence. In doing so, we aim to foster an environment where continuous learning is central.

4. Policy Sections

1. Representation on governance bodies

1.1. The Federation shall achieve balanced representation on all decision-making and leadership bodies where a lack of equal representation has been identified, including:

1.1.1. Governing bodies of Member Associations;

1.1.2. IPPF Board of Trustees and its standing committees and working groups;

1.1.3. IPPF Nominations and Governance Committee.

1.2. Where a lack of balanced representation on governance body is identified, the Federation shall implement affirmative action to remedy those imbalances by:

1.2.1. Making additional efforts to attract, recruit and promote women and people with diverse SOGIESC;

1.2.2. Giving preference to eligible women, people with diverse SOGIESC, those with lived experiences speaking to the work of the Federation, and individuals from marginalised groups, where there is a choice of candidates;

1.2.3. Ensuring gender budgeting and gender-equitable resource allocation to address systemic disparities.

2. Gender assessments and gender budgeting

Gender assessments and budgeting are essential to mainstreaming and integrating gender equality across all aspects of the Federation. They shall be structural, institutional, and leadership priorities. This will be achieved by:

2.1. Periodic conduct a gender impact assessment of all of IPPF's key strategies;

2.2. Periodic conduct of other gender assessments and gender audits to ensure support and evaluate gender mainstreaming across the Federation, its programmes and services.

2.3. Investment in collection and analysis of quantitative and qualitative data that provide the evidence needed to identify gaps, opportunities, and success markers in gender mainstreaming and accountability. Data gathering shall involve local and target communities to ensure a diversity of perspectives and views are factored into data sets. Additionally:

2.3.1. Where possible, quantitative and qualitative data shall be sex-disaggregated. Where feasible and safe to do so, data will be gender-disaggregated beyond the binary options to reflect diverse self-identification.

2.3.2. Data shall also be disaggregated by age, disability, and other factors to account for intersecting identities so that specific needs and barriers faced can be identified, and the necessary responses to address them taken effectively.

2.3.3. All data-collection efforts shall prioritise the security and protection of the data collected and uphold the privacy of individuals who have shared their data.

3. Gender equality in design and delivery of programmes and services

The Federation's programme and service delivery shall be rooted in actions that actively challenge gender inequities and promote meaningful change:

3.1. Programmes and services shall be designed through participatory, community-led, grassroots-driven, and youth-inclusive approaches in accordance with the Policy's principles, integrating pleasure, consent, and emotional well-being while considering local realities and cultural contexts. This will be achieved by:

3.1.1. Establishing mechanisms to support equal and meaningful participation of people of all ages—including youth, girls, women, and people with diverse SOGIESC—in all their diversity. This includes addressing social, structural, and institutional barriers that may hinder participation, even when opportunities are available.

3.1.2. Prioritising the voices of minoritised racial and ethnic groups using an intersectional approach that explicitly addresses how race intersects with other systems of oppression in service provision.

3.1.3. Ensuring programmes and services are designed to challenge harmful social norms that limit access and undermine gender equality, including son preference; early and forced marriage; intimate partner and domestic violence; and female genital mutilation/cutting (FGM/C).

3.1.4. Ensuring programmes and services designs and delivery meets the needs of those facing multiple and intersecting systems of oppression and those facing unique challenges requiring specific support and care, including those who are denied access to care (for example, in cases of forced pregnancy or forced sterilisation).

3.1.5. Building staff capacity in gender mainstreaming and transformative gender justice approaches that improve individual and community access to services and respect for human rights.

3.2. Programmes and services shall implement and comply with safeguarding policies and mechanisms to protect the groups and individuals most at-risk of stigma, discrimination and abuse, specifically persons with disabilities, people living with HIV, sex workers, intersex and transgender individuals, people who use drugs, those in institutions, and those trafficked for sex;

3.3. All internal policies that require spousal/partner consent for access to services, for example to abortion services, contraception, and emergency obstetric care shall be abolished.

3.4. Further programme and service design and delivery shall be grounded in feminist and decolonial practices, acknowledging the historical and systemic impact of racism, sexism and colonialism within international aid and implementation of SRHRJ. This will be achieved by:

3.4.1. Implementing safeguards to prevent abuse, harassment and violence arising from colonial legacies, such as sexual exploitation and abuse in humanitarian and emergency settings.

3.4.2. Recognising and amplifying and integrating the voices, knowledge and practices of local and Indigenous communities in design, delivery and implementation of programmes and services.

4. Gender mainstreaming and accountability

Gender mainstreaming and accountability are essential to integrating gender considerations across all aspects of the Federation, including programme design, processes, and ways of working. They must also be upheld as structural, institutional, and leadership priorities.

4.1. Investment in collecting and analysing data is crucial to provide the evidence necessary to identify gaps, opportunities, and success markers in gender mainstreaming and accountability. It is vital that processes used to do so include local communities to ensure a diversity of perspectives and views are factored into the data sets. Additionally:

4.1.1. Where possible, quantitative and qualitative data collection shall be sex-disaggregated. When feasible and safe, it should also be gender-disaggregated beyond the binary, reflecting diverse self-identification.

4.1.2. Data should be disaggregated by age, disability, and other factors to account for intersecting identities. This approach helps identify specific needs, barriers individuals face, and the necessary responses to address them effectively.

4.1.3. All data-collection efforts must prioritise the security and protection of the data collected and uphold the privacy of individuals who have shared their data.

4.2. Supporting Policies and systems must be in place to ensure the equal and meaningful participation of all individuals in all their diversity, addressing social, structural, and institutional barriers. This includes:

4.2.1. Integrating gender mainstreaming across the Federation through structured mechanisms that support the adoption and implementation of this policy.

4.2.2. Strengthening institutional accountability through gender-responsive budgeting, gender audits, and dedicated human resources with gender expertise.

4.2.3. Facilitate knowledge-sharing by providing opportunities for Member Associations, the Secretariat, and other partners to exchange best practices and learn from each other.

4.2.4. Implementing safeguards to prevent abuse, harassment and violence arising from colonial legacies, such as sexual exploitation and abuse in humanitarian and emergency settings.

5. Gender equality in the workplace

The Federation shall ensure that all its workplace policies comply with this Policy. In particular, the Federation shall:

5.1. Ensure its staff and volunteers are diverse by identity and experience, representing the diversity of communities IPPF serves;

5.2. The Federation will establish mechanisms to support equal and meaningful participation of people of all ages—including youth, girls, women, and people with diverse SOGIESC—in all their diversity. This includes addressing social, structural, and institutional barriers that may hinder participation, even when opportunities are available;

5.3. Apply policies supporting gender mainstreaming equally to all staff, regardless of gender, sexual orientation, gender identity, and marital or relationship status. This includes (but is not limited to) menstrual care and leave, parental leave, access to facilities, equitable benefits, equal pay, and reward structures;

5.4. Provide individuals holding supervisory roles opportunities to build their capacity to adopt a gender transformative, intersectional, and anti-racist approach to their work and leadership;

5.5. The Federation shall prioritise the recruitment of individuals who demonstrate a strong commitment to gender justice and a clear understanding of the core issues central to the Federation's work. Beyond technical skills and formal qualifications, emphasis must be placed on candidates' attitudes, values, and approach to gender equality to ensure they actively contribute to a transformative and inclusive work environment.

As adopted by Central Council, November 1995
Last amended by Board of Trustees, June 2025

1.4. TERMS OF REFERENCE OF THE CHAIR AND THE VICE CHAIR OF THE IPPF BOARD OF TRUSTEES

The Chair of the IPPF Board of Trustees

1. Qualities and Attributes - Person Specification

i. A broad working knowledge of sexual and reproductive health and rights (SRHR) and a personal commitment to the aims and objects of IPPF.

ii. Demonstrated effectiveness as an ethical leader of public standing, with broad experience and profile in advocating for health, human rights, and/or gender and racial equality and non-discrimination, both nationally and internationally. Offers developed knowledge of civil society, feminism, philanthropy, the donor community and/or the multi-lateral system and able to advise and guide the DG accordingly.

iii. Personal experience serving on governance entities, having sound knowledge of associated best practices, including for effective online meetings. Demonstrated commitment to upholding the complementary separations of execution and governance roles. Understands the importance of, and brings proven ability to establish, a resilient, supportive and mutually respectful partnership with a professional CEO.

iv. Ability to inspire and support other governance leaders (vice-chair, committee chairs, board members) to fulfil their roles and responsibilities to a similar standard. Able to build shared- leadership approaches in particular with the vice-chair and with attention to the role of youth trustees. Values and seeks out diverse views and experiences, establishing an ethos of inclusion, fairness and mutual accountability. Ability to chair and otherwise resolve complex deliberations across and within multistakeholder forums with wisdom, bringing discussions to successful conclusion, exercising tact, discretion and impartiality.

v. Experience in supporting, guiding and appreciating high-performing professional staff; committed to establishing an open and implementation-supporting partnership with the CEO as a Board's sole direct report. Able to listen actively, understand issues from an executive's standpoint and adjust own position accordingly. Experience of organisational change processes and crisis management, able to respond flexibly, ask the right questions, support the taking of intelligent risk and be resilient when facing resistance or pushback.

vi. Ability to help lift up the profile and reputation of the Federation, act as a Federation spokesperson and to represent IPPF in national, regional and international forums.

vii. Demonstrated ability to communicate with diverse audiences, from service clientele and activists to politicians, parliamentarians and donors.

viii. Readiness to be flexible and responsive to multiple demands, committing adequate time and energy to the role (i.e. a day a week throughout the year and two full weeks for face-to- face meetings) and available to support the work of other governance leaders and the CEO.

2. Responsibilities – the role

i. To work with the Director-General in setting the agenda for meetings of the Board of Trustees and General Assembly.

ii. To chair meetings of the Board of Trustees and the General Assembly.

iii. To ensure that new Trustees are fully oriented and are provided with all necessary documents, e.g., strategic plans, policy manuals, and budget information.

iv. To contribute meaningfully under the leadership of the Nominations and Governance Committee in the evaluation of the Board of Trustees.

v. To initiate with the Nominations and Governance Committee the functioning of the General Assembly.

vi. To chair the Board of Trustees Sub-Committee meetings as and when the need arises.

vii. To attend IPPF's Annual Donors Meeting.

viii. To provide support for advocacy and resource mobilisation activities on behalf of the Federation as a spokesperson and leader which will include visits to existing IPPF Donors and potential new donors; attendance at Regional Assembly and Youth Forum meetings; visits to IPPF Regional Offices; visits to Member Associations and their activities; and representing IPPF at special international meetings including at the UN and other official meetings.

ix. To take a lead in ensuring that 'good governance' best-practice and potential conflict of interest are understood, addressed and adhered to by IPPF's Board of Trustees, Board's Committees, General Assembly and volunteers.

x. To participate in selection committee meetings for the appointment of the IPPF Director-General, London Office Divisional Directors and Regional Directors.

xi. To ensure support and guidance is provided to the Director-General as appropriate.

xii. To initiate and participate in the annual appraisal process of the Director-General.

xiii. To liaise with the Director-General to maintain an overall perspective of IPPF's affairs.

xiv. To facilitate change and address conflict within the Board of Trustees, General Assembly and within IPPF, liaising with the Director-General to achieve this.

xv. To provide direction to the Board of Trustees and General Assembly as it shapes policy.

xvi. To ensure that the implementation of decisions is clearly assigned and monitored.

xvii. Ensure that business is dealt with, decisions made and adequately documented.

3. Relationships

i. To consult and collaborate with the Director-General to solve problems. This will require a high degree of frankness, trust and support.

ii. To create the same type of relationship with the IPPF Trustees; Members of the Board Committees, Nominations and Governance Committee and the chair of IMAP.

4. Eligibility

i. Nominations for the Chairpersonship can be made both from Trustees coming from IPPF membership or those from outside the Federation.

ii. No-one under the age of 18 is eligible, and some people are disqualified by law from acting as charity trustees, including anyone described in section 72(1) of the UK Charities Act 1993. This includes:

a) anyone who has been convicted of an offence involving deception or dishonesty, unless the conviction is spent;

b) anyone who is an undischarged bankrupt;

c) anyone who has previously been removed from trusteeship of a charity by the Court or the Commissioners for misconduct or mismanagement; and

d) anyone who is under a disqualification order under the Company Directors Disqualification Act 1986.

The Vice Chair of the IPPF Board of Trustees

5. Qualities and Attributes

i. A broad knowledge of IPPF and a personal commitment to its aims and objects.

ii. Demonstrated effectiveness as a leader within the field of sexual and reproductive health, including family planning, and in advocating that cause both nationally and internationally.

iii. Adequate time to commit to support the Chair in leading the Board of Trustees, General Assembly, working with Board Committees, Nominations and Governance Committee, the Director-General and on the request of the Board Chair, represent IPPF in related national, regional and international bodies and organizations.

iv. The ability to communicate with politicians, parliamentarians, donors and "civil society" in general.

v. The ability to inspire members of the Board of Trustees to fulfil their roles and responsibilities.

vi. To be politically aware and possess the ability, in the absence of the Board Chair, to chair meetings of the Board of Trustees and the General Assembly effectively and to guide the Trustees and Assembly through its agenda.

vii. The ability to relate easily and comfortably with all members of the Board of Trustees, Nominations and Governance Committee, the Board Committees, General Assembly as well as the Regional Assemblies, Youth Forums and with Secretariat staff at all levels.

viii. The ability to cultivate a relationship with the Director-General that respects the position of each.

ix. Demonstrate a willingness to lead.

x. Leadership skills – good independent judgement.

xi. Experience of chairing a governing board or committee.

xii. Tactful, diplomacy and wisdom in appropriate situations.

xiii. Good communication and interpersonal skills.

xiv. Able to engender trust, honesty, support, openness and confidence.

xv. Impartiality, fairness, and the ability to respect confidentiality.

xvi. Knowledge of the type of work undertaken by IPPF and a wider involvement with the NGO sector and other networks is desirable.

xvii. Respect for all.

xviii. Willingness and ability to speak his or her mind.

6. Responsibilities

In addition to the responsibilities outlined for the Board Members, the Vice Chair is expected to:

i. Perform the Board Chair's responsibilities when the Board Chair is unavailable.

ii. Work in conjunction with the Board Chair and serves as a first point of contact to ensure all Governance committees are organized, functional and productive based on the roles and responsibilities outlined in the Committees' Terms of reference.

iii. Work in conjunction with the Board Chair, Nominations and Governance Committee Chair and the Director General:

a. on matters and activities related to the IPPF's short- and long-term strategic vision and planning.
b. to ensure that Board members understand policies and procedures that guide the work of the IPPF.
c. on Donor Engagement to facilitate enhanced fund raising/business development/ visibility for IPPF.

iv. At the request of the Chair, represent IPPF at events and meetings.

v. Perform any other responsibilities as requested by the Board Chair.

7. Relationships

i. To support the Board Chair and in their absence take on the Board Chair's responsibilities.

ii. To consult and collaborate with the Director-General to solve problems. This will require a high degree of frankness, trust and support.

iii. To create the same type of relationship with the IPPF Trustees, Members of the Board Committees, Nominations and Governance Committee and the chair of IMAP.

8. Eligibility

i. Nominations for the Vice Chairpersonship can be made both from Trustees coming from IPPF membership or those from outside the Federation.

ii. No-one under the age of 18 is eligible, and some people are disqualified by law from acting as charity trustees, including anyone described in section 72(1) of the UK Charities Act 1993. This includes:

a) anyone who has been convicted of an offence involving deception or dishonesty, unless the conviction is spent;

b) anyone who is an undischarged bankrupt;

c) anyone who has previously been removed from trusteeship of a charity by the Court or the Commissioners for misconduct or mismanagement; and

d) anyone who is under a disqualification order under the Company Directors Disqualification Act 1986.

9. Nomination procedures for Officer positions

An individual shall only be nominated for one of the Officer positions at a time.

10. Procedure for Conducting Election of the Chair and Vice Chair of the IPPF Board of Trustees

i. The procedure for nomination and election of the Chair and Vice Chair of the Board of Trustees shall be in accordance with the Procedural Byelaws.

ii. In analysing the candidates for the position of the Chair and Vice Chair of the Board of Trustees, the Nominations and Governance Committee should seek to ensure that their recommendations fulfil the qualities and attributes expected of the office holder and is capable of undertaking the responsibilities of the respective post.

iii. The Board of Trustees shall have the authority of electing the appropriate candidate for the post of Chair and Vice Chair of the Board of Trustees.

11. Rapid response team

The Chair and the Vice Chair of the Board of Trustees of IPPF, and the Director-General will act as a rapid response team to deal with emergency issues that require governance approval. This team will also include the Regional Director of an affected region, except when the Director-General deems it inappropriate to involve the Regional Director.

As adopted by Governing Council, May 2002
As amended by the Board of Trustees, June 2025

1.5. TERMS OF REFERENCE OF THE LEGAL COUNSEL

1. Role

As a volunteer, to act as general counsel to the Federation in matters pertaining to legal and institutional questions

2. Functions

i. To provide advice to the Federation, as may be necessary on matters of legal and institutional nature, taking into account the incorporation of the Federation by the UK Parliament and the UK laws under which the Federation operates;
ii. To serve in an advisory capacity as a legal resource person to meetings of the Federation's central bodies on questions of interpretation of the IPPF's basic governing instruments (IPPF Act and Regulations, Procedural Byelaws, Policies and membership standards if required) and generally on legal matters and procedure, as applicable;
iii. To assist the Chair of the Board of Trustees and the Director-General at the time of meetings of the Federation's governing bodies, on questions of procedure, relating to the orderly transaction of business and to the duties of Chair of the Board of Trustees and members in connection with the meetings;
iv. To review during the meetings the text of resolutions adopted, to verify their constitutionality under the IPPF Act and Regulation, Procedural Byelaws and UK laws and advise the Chair on legally required redrafting.

3. Term of Office

The Honorary Counsel to the Federation appointed by the Board of Trustees shall serve for a term of three (3) years and their total consecutive service shall not exceed two terms. If the position becomes vacant for any other reason, a replacement shall be appointed forthwith.

4. Qualifications (desirable)

i. Legal education, preferably with training under the English law system, considering the enactment of the IPPF ACT under the UK Parliament and other UK law regulating the operations of the Federation (Charity Law, Companies Law, Inland Revenue Code);
ii. Knowledge of the IPPF system and its constitutional framework;
iii. Well-informed knowledge or experience with procedures in general, defined as rules of order for group discussion and action during meetings;
iv. Specific knowledge of IPPF Procedural Byelaws designed as the IPPF special standing rules of order governing the procedure at meetings of any governing bodies or board committees, and any other committees, panels or subgroups set up by the Board of Trustees and/or the General Assembly.

5. Procedure for appointment

i. The Nominations and Governance Committee shall launch a call for application at least three months prior to the expiration of the term of office of the serving Legal Counsel. Such timeline should be omitted in case of casual vacancy that requires a speedy process.
ii. Applications shall follow the mechanism set down by the Nominations and Governance Committee.
iii. Upon closure of the call for applications, the Committee will scrutinize all applications received against the Terms of reference of the Legal Counsel and put before the Board of Trustees all the valid applications for the decision of the Board.
iv. The Board of Trustees shall appoint the new Legal Counsel through a vote.
v. The candidates with the majority of the votes of the Trustees present at a meeting of the Board shall be declared appointed.
vi. In case of only one candidate, if the candidate is suitable, there shall be no vote and the candidate shall be declared appointed by acclamation.

As adopted by Central Council in 1984
Amended by Governing Council in May 2020

Policy 1.6

1.6. GENERAL ASSEMBLY - TERMS OF REFERENCE

1. Introduction

1.1 IPPF is a UK registered charity and a worldwide Federation of 119 national Member Associations (MAs) working in over 150 countries across the globe. It is a leading civil society organisation working on issues of sexual and reproductive health and rights. IPPF's Secretariat comprises the London Office and Regional Offices in Mexico City, Brussels, Tunis, Nairobi, Kuala Lumpur and New Delhi.

1.2 IPPF's governance structure was reformed in 2020. The highest authority of the new governance structure is a General Assembly of IPPF Member Associations, convened once every three years. A Board of Trustees governs the IPPF secretariat and provides leadership for the Federation. The Board is supported by a committee system, some committees having delegated authority and others providing advice to the Board. A Nominations and Governance Committee[1] reports directly to the General Assembly.

1.3 IPPFs' core mission is to lead a locally owned, globally connected civil society movement that provides and enables services and champions sexual and reproductive health and rights for all, especially the under-served. This strategic objective is overseen by the Board of Trustees (the Board) and the General Assembly (the GA).

2. Purpose

2.1 Subject to the Regulations, the General Assembly shall be the supreme governing body of the International Planned Parenthood Federation.

3. Composition

3.1 The General Assembly shall be composed of the Member Associations (Full and Associate).

3.2 Full Member Association delegations shall normally include the Chair of the MA Board or other governance representative, a youth representative and the Executive Director. Associate MAs delegations shall normally include two representatives only.

4. Role

4.1 The General Assembly shall, among others, exercise the following functions:

a) Review and approve the overall strategic direction of the Federation
b) Provide input into Board of Trustees policies and decisions
c) Adopt and amend the Regulations of the Federation
d) Confirm amendments made to the Procedural Byelaws by the Board of Trustees
e) Scrutinize the work of the Board of Trustees and the Director General and the financial performance of IPPF
f) Receive reports from the Nominations and Governance Committee
g) Appoint members of the Nomination and Governance Committee as these rotate off

[1] See separate Terms of Reference for responsibilities of the Nominations and Governance Committee

h) Confirm appointments to the Board of Trustees
i) Remove, at the request of a two-thirds majority of its full members, one or more trustees from the Board of Trustees

5. Meetings, Quorum, proxy, voting and required majorities

5.1 The General Assembly shall meet in ordinary session once every three years.
5.2 The General Assembly shall be chaired by the Chair of the Board of Trustees.
5.3 The quorum shall be 50% + 1 of the total number of Full Member Associations existing at the time of the General Assembly.
5.4 Full Member Associations shall be entitled to vote at the General Assembly. Associate Member Associations do not have voting rights.
5.5 Each Member Association represented at the General Assembly and entitled to vote shall have one vote.
5.6 MAs that are not at all represented or are only represented at the GA by a staff member are required to exercise their voting rights through a proxy.
5.7 A Member Association can give a proxy to another MA of their choice provided that such proxy is given in advance of the starting of the meeting. No MA can hold more than one proxy.
5.8 Decisions of the General Assembly shall be taken by a simple majority of the MAs registered and voting, including proxy votes unless provided otherwise in IPPF Regulations. Member Associations participating virtually may be permitted to exercise their voting rights under exceptional circumstances, for example when a natural disaster or political upheaval result in non-attendance.
5.9 A decision by the General Assembly to remove one or more Trustees from the Board of Trustees requires a two-thirds majority of the full membership.

6. Extraordinary General Assembly

6.1 An extraordinary General Assembly can be called by the Board of Trustees or on the request of two-thirds of Full Member Associations.

As adopted by Governing Council, May 2020

1.7. NOMINATIONS AND GOVERNANCE COMMITTEE - TERMS OF REFERENCE

1 Introduction

1.1 IPPF is a UK registered charity and a worldwide Federation of 119 national Member Associations working in over 150 countries across the globe. It is a leading civil society organisation working on issues of sexual and reproductive health and rights. IPPF's Secretariat comprises the London Office and Regional Offices in Mexico City, Brussels, Tunis, Nairobi, Kuala Lumpur and New Delhi.

1.2 IPPF's governance structure was reformed in 2020. The highest authority of the new governance structure is a General Assembly of IPPF Member Associations, convened once every three years. A Board of Trustees governs the IPPF secretariat and provides leadership for the Federation. The Board is supported by a committee system, some committees having delegated authority and others providing advice to the Board. The Nominations and Governance Committee reports directly to the General Assembly.

1.3 IPPFs' core mission is to lead a locally owned, globally connected civil society movement that provides and enables services and champions sexual and reproductive health and rights for all, especially the under-served. This strategic objective is overseen by the Board of Trustees (the Board) and the General Assembly (the GA).

2 Purpose

Reporting to the General Assembly, the purpose of the Nominations and Governance Committee is to:

2.1 Recruit the members of the Board of Trustees in accordance with agreed guidelines[1], including succession planning.

2.2 Oversee an annual process for evaluating the effectiveness of the Board and its members.

2.3 Recruit the members of the standing committees of the Board in liaison with the Board Chair.

2.4 Oversee an evaluation of the effectiveness of standing committees, including a self-evaluation of the NGC as established in 3.3.

2.5 Review periodically the Procedural bylaws and make recommendations to the Board.

2.6 Ensure that the Federation adheres to and operates in accordance with best governance practices.

[1] Details on the composition and selection of the Board of Trustees and Committees is attached as annex 1.

3 Main responsibilities and tasks of the Committee

3.1 The Committee shall have the following prerogatives, functions, and duties:

3.2 Recruit trustees and committee members in accordance with agreed clear guidelines, including succession planning.

3.3 Oversee an annual process for evaluating the effectiveness of the Board and its members, of all Board standing committees and of itself.

3.4 Periodically review the regulations and procedural byelaws and ensure that the Board complies and operates in accordance with governance best practices.

3.5 Report to the General Assembly on the implementation and effectiveness of the matters set out at paragraphs 3.2 and 3.3.

4. Membership of the Nominations and Governance Committee

4.1 The Committee shall be comprised of 7 members of which at least 50% shall be women and at least 20% young persons under the age of 25 at the time of their appointment.

4.2 A majority of members shall be from Member Associations.

4.3 Committee members shall meet required standards of expertise, skills and experience according to established criteria. Members shall be individuals with relevant experience in membership issues and the legal field.

4.4 Committee members cannot also be employees of either the IPPF secretariat or any IPPF Member Association.

4.5 Every three years at least two members (2/7) of this committee will rotate off. The nomination of members to the NGC will be conducted by the committee itself. The nominees will be put forward to the General Assembly for its approval.

4.6 A retired or a former employee or an agent (a person who has authority to act on behalf of another. This includes employees, contractors, professional advisers, etc.) of the Secretariat or of a Member Association shall only apply to become an NGC member following a cooling off period of 12 months from the end of their respective service.

4.7 A former or a current NGC member shall only apply to become an employee of the Secretariat or a Member Association following a cooling off period of twelve months from the end of their NGC membership.

5. Terms of Office

5.1 Committee members serve for three-year terms, with the possibility of re-election once, i.e., a maximum of two terms, or six years, before a member must rotate off the Board. Committee members are ineligible to re-stand for the Committee at any time in the future after having served two terms.

5.2 Committee members must meet the following criteria in order to be re-appointed - regular attendance at meetings, participation and value contributions during meetings and contribution as an ambassador for IPPF. These criteria form the basis of an annual evaluation process.

5.3 Members' terms are staggered in order to maintain continuity of organisational knowledge and expertise within the Committee. The Chair may determine the order in which the members rotate off the committee.

6. Committee Leadership

6.1 Committee Chair

a) There shall be a Chair who is appointed from amongst the members.
b) The Chair leads the Committee to enable it to fulfil its purpose, chairs meetings of the Committee ensuring that business is dealt with, decisions made and adequately minuted and that the implementation of decisions is clearly assigned and monitored.

6.2 Committee Vice Chair

a) There shall be a Vice Chair who is appointed amongst the members
b) The Vice Chair shall perform the Chair's responsibilities when the Chair is unavailable or at the request of the NGC Chair and perform any other responsibilities as requested by the NGC Chair.
c) Work in conjunction with the NGC Chair, the Board Chair, the Director-General or his/her/their representatives:

7. Committee Meetings and Quorum

7.1 The Committee shall meet two times each year or otherwise as required and shall follow such formal business agenda as circulated prior to the meeting.

7.2 Meetings of the Committee may be held in person (maximum two times per year) or by suitable electronic means agreed by the Board in which all participants may communicate with all other participants.

7.3 Four Committee members present in person or by electronic means shall constitute a quorum.

7.4 All meetings shall be chaired by the Committee Chair. If the Chair is unable to attend a particular meeting the committee will be expected to name another committee member to act as Chair.

7.5 Questions arising at any Committee meeting shall be decided by a simple majority of votes unless provided in IPPF Regulations and Procedural bylaws. Every Committee member shall have one vote. If the votes are equal, the chair of the meeting shall cast a casting vote.

7.6 The minutes of all meetings shall, except for any information of a personal nature, be available for inspection by Member Associations and any other persons as authorised by the Board.

7.7 The Committee may by a simple majority take decisions between its regular meetings, by other means (including electronically).

8. Review

These terms of reference should be regularly reviewed and updated in accordance with the general policy.

Annex 1

Composition and selection of the Board of Trustees and Committees

1. Composition of the Board of Trustees

The Board of Trustees shall be comprised of 15 trustees, with nine trustees coming from IPPF membership, drawn from applications submitted by volunteers, and with six external trustees. All trustees must meet minimum standards of expertise, skills and experience according to criteria established by the Nominations and Governance Committee. At least 20% of trustees shall be under 25 years old at the time of appointment and at least 50% shall be women.

With regard to the overall makeup of the Board, the following must also be considered:

- Geographical diversity; and
- Representation of "at risk" and most in need populations

Criteria for selecting individual Trustees to serve on the Board and its Committees includes having experience in one or more of the following areas:

- Leadership in SRHR
- Governance at the international or national level
- Senior executive experience
- Program delivery experience
- Financial control and oversight
- Risk management
- Legal expertise
- Fundraising and resource mobilization
- Experience of advocacy and working with government
- Youth networking/youth action
- Peer-to-peer service delivery
- Other skills, experience and attributes relevant to global governance.

2. Selection of Trustees and Committee Members

The Nominations and Governance Committee is responsible for recruiting prospective Trustees for the Board of Trustees and members for Board Standing Committees and must ensure an open and transparent recruitment processes.

The recruitment of Trustees and Committee Members shall be subject to a rigorous process following a worldwide search calling for nominations through MAs and where relevant externally. The call will detail clear and measurable criteria for the individual roles advertised, taking account of the overall composition of the Board and Committees and the specific gaps existing at any given time. A skill matrix should be widely disseminated to set clear expectations for candidates. Information should also include time requirements and availability to perform the duties, including for that of Chair of the Board and for Chairs of Committees.

3. Reappointment of Trustees and Committee members

There should be no assumption on the part of Trustees and Committee members that re-appointment to a second term is automatic.
Trustees and Committee members must meet the following criteria in order to be re-appointed - regular attendance at meetings, participation and value contributions during meetings and contribution as an ambassador for IPPF. These criteria form the basis of an annual evaluation process.

At the end of a term the Nominations and Governance Committee, in consultation with the Chair of the Board of Trustees, determines if the Trustee/Committee member meets the requirements to be considered for a second term of office.

As adopted by Governing Council, May 2020
Amended by IPPF Board of Trustees, June 2026

1.8. BOARD OF TRUSTEES - TERMS OF REFERENCE

1. Introduction

1.1 IPPF is a UK registered charity and a worldwide Federation of 119 national Member Associations working in over 150 countries across the globe. It is a leading civil society organisation working on issues of sexual and reproductive health and rights. IPPF's Secretariat comprises the London and Regional Offices in Mexico City, Brussels, Tunis, Nairobi, Kuala Lumpur and New Delhi.

1.2 IPPF's governance structure was reformed in 2020. The highest authority of the new governance structure is a General Assembly of IPPF Member Associations, convened once every three years. A Board of Trustees governs the IPPF secretariat and provides leadership for the Federation. The Board is supported by a committee system, some committees having delegated authority and others providing advice to the Board. A Nominations and Governance Committee[1] reports directly to the General Assembly.

1.3 IPPFs' core mission is to lead a locally owned, globally connected civil society movement that provides and enables services and champions sexual and reproductive health and rights for all, especially the under-served. This strategic objective is overseen by the Board of Trustees (the Board) and approved by the General Assembly (the GA).

1.4 The Board sets policy and overall strategic direction for IPPF in the interests of Member Associations and the people they serve.

1.5 The Board reports to the General Assembly.

1.6 The Board is made up of Trustees drawn from the IPPF membership and from outside the Federation (see Section 4). It is supported by standing committees[2] as well as any ad hoc committees or task forces as may be established from time to time. Executive staff provide input to Board meetings as determined by the Director General.

1.7 Trustees are unpaid volunteers.

2. Purpose

2.1 The Board of Trustees has ultimate responsibility for overseeing the activities of the IPPF secretariat, in line with the requirements of the Charities Acts and as prescribed by the IPPF Act and Regulations and its Procedural Byelaws . The purpose of the Board of Trustees is to govern the organisation, approve IPPF's broad policies, uphold membership values, appoint and evaluate the performance of the Director

[1] See separate Terms of Reference for responsibilities of the Nominations and Governance Committee

[2] The standing committees of the Board are: Membership; Finance, Audit and Risk; Policy, Strategy and Investment; and Resource Allocation Technical Committee. See separate terms of reference for each committee.

General, and to ensure the financial viability of the Secretariat and sustainability of IPPF.

2.2 The Director General, supported by the Executive and staff, is responsible for the delivery of the strategic plan and the operations of the Secretariat.

3. Main responsibilities and tasks of the Board

3.1 Statutory duties under Charity Law:

a) Carry out IPPF's purpose for the public benefit
b) Ensure IPPF complies with its governing document and the law
c) Act in IPPF's best interests
d) Manage IPPF's resources responsibly
e) Act with reasonable care and skill
f) Ensure that IPPF is accountable to its stakeholders

3.2 The role of the Board of Trustees is to:

a) Appoint the Chair of the Board from amongst the Trustees and appoint other Trustees to serve in any other office that is required
b) Appoint, evaluate the performance of and dismiss the Director General
c) Ensure that IPPF has a clear vision and a strategy focused on its achievement
d) Ensure that IPPF meets its objectives and retains its ethos and values
e) Ensure that IPPF complies with its legal and regulatory requirements
f) Establish committees of the Board and review and amend terms of reference and reporting arrangements of all such committees and any ad hoc committees
g) Ensure that expert advice is received and considered from Standing Committees and others before decisions are made
h) Act as guardians of IPPFs assets and ensure the financial stability of the organisation
i) Approve guidelines and indicative financial allocations to Member Associations.
j) Establish performance objectives of the Director General, ensuring that they appropriately address the needs of members and are in keeping with global SRHR developments.

3.3 To shape strategy by:

a) Ensuring that IPPF pursues sound and proper principles, policies and procedures in relation to all areas of its work
b) Shaping IPPFs global strategy in consultation with Member Associations and other stakeholders for approval by the General Assembly, identifying priorities and developing a long-term financial strategy to ensure adequate resources
c) Conducting a midterm review of its implementation
d) Engaging actively in strategic decision making and policy decisions to implement the agreed strategy
e) Keeping under review the long-term development of IPPF in light of the political, economic and social environment in which it operates
f) Approving IPPF's business plan
g) Approving the annual budget
h) Approving three yearly plans for allocation of resources to Member Associations

3.4 To inspire effective leadership by:

a) Appointing the Director General and reviewing the DG's performance
b) Agreeing and delegating appropriate levels of responsibility and authority to the Committees of the Board, Board members, groups of Board members and to the Director General and other senior staff
c) Agreeing annually the delegation of financial responsibilities
d) Lending its own expertise to IPPF
e) Acting as advocates of IPPF
f) Advising and giving feedback to the Director General

3.5 To monitor performance by:

a) Ensuring that appropriate risk management and effective internal control systems are in place
b) Ensuring that the necessary management information systems exist to assess IPPF's overall performance and progress in meeting its objectives, including evaluation of operational effectiveness and efficiency, compliance with laws and regulations and the reliability of management and financial information

3.6 To ensure accountability by:

a) Acting in accordance with the Nolan Committee's Seven Principles of Public Life – selflessness, integrity, objectivity, accountability, openness, honesty and leadership
b) Declaring any interest which may conflict with those of IPPF and managing in accordance with best practice principles
c) Ensuring that Director-General has clear accountability
d) Accounting for the Board's action in appropriate ways as required by law and good practice, approving the form and content of the Annual Reports to members, and making arrangements for the General Assembly of members
e) Proposing changes to the Regulations where necessary
f) Making changes to the Procedural byelaws and presenting to the GA for approval
g) Reporting appropriately to the General Assembly and ensuring that General Assembly and Regional Forums have the opportunity to express their views to the Board
h) Facilitating review of the Board's performance and effectiveness conducted annually by the Nominations and Governance Committee

3.7 To ensure effective management by:

a) Delegating all management tasks not specifically mentioned as responsibilities of the Board of Trustees to the Director General

4 Membership of the Board

4.1 The Board shall be comprised of 15 Trustees: nine drawn from IPPF Member Associations and six recruited externally. The composition of the Board shall include at least 20 percent of young people under 25 years old at the time of the term appointment and at least 50 percent women. Other criteria for determining the composition of the Board are attached as annex 1.

4.2 All trustees must meet specific profiles on expertise, skills and experience according to the criteria annexed to these Terms of Reference and reviewed from

time to time by the Nominations and Governance Committee, in consultation with the Board Chair.

4.3 Members of the Board drawn from the membership will be current members of the MA. Candidates are required to provide written confirmation from the MA of their membership status and role within the MA.

4.4 A Trustee may not be an employee of the IPPF Secretariat or of any Member Association.

4.5 The Board, once formed, draws new members from a slate presented by the Nominations and Governance Committee, based on clear criteria for the recruitment of each board member, considering the specific needs of the board when vacancies arise.

4.6 A decision to remove one or more Trustees from the Board of Trustees requires a two-thirds majority of the General Assembly

4.7 Current members of the Nominations and Governance Committee are ineligible to serve on the Board of Trustees.

4.8 New Trustee appointments are confirmed by the General Assembly.

5 Board Terms of Office

5.1 Trustees serve for three-year terms, with the possibility of re-election once, i.e., a maximum of two terms, or six years, before a member must rotate off the Board. Trustees are ineligible to re-stand for the Board at any time in the future after having served two terms.

5.2 Any term of office served prior to the adoption of the new governance structure in any governing bodies at global level shall be counted while determining Trustees cumulative term of office.

5.3 Trustees must meet the following criteria in order to be re-appointed - regular attendance at meetings, participation and value contributions during meetings and contribution as an ambassador for IPPF. These criteria form the basis of an annual evaluation process.

5.4 Trustee terms are staggered[3] in order to maintain continuity of organisational knowledge and expertise within the Board.

6 Trustee Officials

6.1 There shall be a Chair and a Vice Chair elected by the BOARD of Trustees.

6.2 The Chair leads the Board of Trustees and the General Assembly ensuring that governance fulfils its purpose and chairs Board meetings and other official meetings[4] ensuring that:

a. business is dealt with, decisions made and adequately minuted
b. the implementation of decisions is clearly assigned and monitored and decision at meetings are implemented
c. support and guidance are provided to the Director General

6.3 The Vice-Chair of the Board of Trustees has the following responsibilities:

[3] Refer to internal document 'Staggering of the Board of Trustees to ensure institutional memory' on how the staggering will take place for the first BoT. See Annex 2.

[4] This includes chairing the General Assembly as specified in the General Assembly Terms of Reference

a) Perform the Board Chair's responsibilities when the Board Chair is unavailable.
b) Work in conjunction with the Board Chair and serves as a first point of contact to ensure all Governance committees are organized, functional and productive based on the roles and responsibilities outlined in the Committees' Terms of reference.
c) Work in conjunction with the Board Chair, Nominations and Governance Committee Chair and the Director General:
    i. on matters and activities related to the IPPF's short- and long-term strategic vision and planning.
    ii. to ensure that Board members understand policies and procedures that guide the work of the IPPF.
    iii. on Donor Engagement to facilitate enhanced fund raising/business development/ visibility for IPPF.
d) At the request of the Chair, represent IPPF at events and meetings.
e) Perform any other responsibilities as requested by the Board Chair.

7 Board Committees

7.1 The four standing committees of the Board are: Finance, Audit and Risk; Membership, Policy, Strategy and Investment; and Resource Allocation Technical Committee[5].

7.2 Trustees are encouraged to serve on at least one Committee.

7.3 There shall be a maximum of two Trustees on any one Committee.

7.4 The Chair of each of the four Board Committees shall be appointed by the Board of Trustees. Each Committee Chair shall be appointed for a three-year term. No person can serve as Chair of any of these Committees for more than two terms cumulatively. The Chair will generally be a Trustee.

7.5 There will be a maximum of seven members on each standing committee, including those members who are Trustees.

7.6 External members are selected by the Nominations and Governance Committee for a specific skill set, as expressed by the Chair of the Committee and are external to MAs.

7.7 Committee members serve for terms of up to three years. Members may serve for a second term. Committee members are ineligible to re-stand for the committee at any time in the future after having served cumulatively for two terms.

7.8 Committees report to the Board through the Committee Chair. Committee members do not attend Board meetings unless specifically requested.

7.9 The Board shall appoint additional committees, task forces or working groups as required.

8 Board Meetings, Quorum, Voting and required majorities

8.1 The Board shall meet at least three times each year - two times face-to-face and one virtually as required. It shall follow a formal business agenda as circulated prior to the meeting.

8.2 Meetings of the Board may be held in person or by suitable electronic means, as agreed by the Board, in which all participants can communicate with all other participants.

[5] See separate terms of reference for each committee

8.3 Eight Trustees present in person or by electronic means shall constitute a quorum.

8.4 All Board meetings shall be chaired by the Board Chair. In the unlikely event that the Chair is unable to be present, the Board shall appoint another Trustee to act as Chair of that meeting.

8.5 Questions arising at any Board meeting shall be decided by a simple majority of votes present unless otherwise stated in the Act and Regulations. Every Trustee shall have one vote. If the votes are equal, the chair of the meeting shall cast a casting vote.

8.6 The minutes of all Board meetings shall, except for minutes of 'in camera sessions' and any information of a personal nature, be available for inspection by Member Associations and any other persons as authorised by the Board. The reports of the General Assembly shall be similarly available for inspection.

8.7 The Board may by a simple majority of all Trustees, take decisions between meetings by any means (including electronically) unless otherwise stated in the Act and Regulations.

8.8 Extraordinary meetings of the Board can be called by the Chair or by one-third of the Trustees. Such meetings may be held virtually or face-to-face.

9 Legal Counsel

9.1 Legal Counsel is a non-voting volunteer advisory position and is additional to the 15 Board members. He/she will be in attendance of board meetings. As a volunteer, they act as general counsel to the Federation in matters pertaining to legal and institutional questions, specifically to:

a) advise the Federation on UK laws under which the Federation operates
b) serve in an advisory capacity as a legal resource person to meetings of the Federation's central bodies on questions of interpretation of the IPPF's governing instruments
c) assist the Chair of the Board and the Director-General at the time of meetings of the Federation's central bodies, on questions of procedure, relating to the orderly transaction of business and to the duties of Chair and members in connection with the meeting
d) review during the meetings the text of resolutions adopted, to verify their constitutionality under the IPPF ACT , Regulations, Procedural bylaws and UK laws and advise the Chair on legally required redrafting.

10 Review

10.1 The Board will produce an Annual Trustee's Report including financial performance information for the membership on a yearly basis.

10.2 These terms of reference should be updated regularly in accordance with the general policy review process.

10.3 The Nominations and Governance Committee will oversee an annual assessment of the performance of the Board of Trustees, including Member Association opinions and commentary.

Annex 1

Composition of the Board of Trustees

The Board of Trustees shall be comprised of 15 trustees, with nine trustees coming from IPPF membership, drawn from applications submitted by volunteers, and with six external trustees. All trustees must meet required standards of expertise, skills and experience according to criteria established by the Nominations and Governance Committee. At least 20% of trustees shall be under 25 years old at the time of appointment and at least 50% shall be women.

With regard to the overall makeup of the Board, the following must also be considered:

- Geographical diversity; and
- Representation of "at risk" and most in need populations

Criteria for selecting individual Trustees to serve on the Board and its Committees includes having experience in one or more of the following areas:

- Leadership in SRHR
- Governance at the international or national level
- Senior executive experience
- Program delivery experience
- Financial control and oversight
- Risk management
- Legal expertise
- Fundraising and resource mobilization
- Experience of advocacy and working with government
- Youth networking/youth action
- Peer-to-peer service delivery
- Other skills, experience and attributes relevant to global governance.

These criteria were agreed by the extraordinary General Assembly and approved by the Governing Council in Delhi India, December 2019

Annex 2

Staggering of the Board of Trustees to ensure institutional memory

Rationale

To encourage continuity and ensure institutional memory, one third (five trustees) of the Board of Trustees will rotate on a yearly basis, with the option of being re-appointed at the end of their initial term for another term of three-years subject to successful performance review conducted by the Nominations and Governance Committee. This will promote good governance by refreshing the Board and fostering innovation and new ideas while ensuring at the same time continuity within the Board by retaining leadership talent and ensuring succession planning.

Suggested process

1. All the trustees will be initially appointed for a minimum of a one-year term, subject to the outcomes of the staggering exercise to take place following the appointment of the Chair of the Board and the other four Standing Committee Chairs.
2. The staggering shall be determined by a random drawing of lots under the leadership of the Legal Counsel.
3. Prior to conducting the drawing of lots, the Chair of the Board of Trustees and the four standing Committee Chairs will already be appointed or nominated as per the appropriate Terms of Reference.
4. The Chair of the Board and the other four Standing Committee Chairs shall be excluded from the drawing of lots and will not be part of the staggered rotation process in order to ensure continuity of these trustees in their respective roles.
5. All those elected and/or appointed as either the Board of Trustees Chair, or as Standing Committees Chairs will serve a three-year term to enable them to perform their role without interruption.
6. The remaining ten (10) Trustees will take part in the drawing of lots process where there will be five lots with a one-year term and five other lots with a two-year term.
7. The drawing exercise will enable the Board of Trustees to determine trustees who are elected for an initial term of one year and those elected for an initial term of two years.
8. At the last meeting of the Board of Trustees during a calendar year, one-third of trustees shall be subject to retirement by rotation. This rotation should respect gender and youth balance requirements for the Board of Trustees composition.
9. Since there will be three trustees (20% youth) below the age of 25 years at the time of their appointment and in order to ensure that not all the young people rotate off from the Board at any given time due to the fact that they may be over 25 years old at the time of their prospective re-appointment, priority shall be given to them so that these three trustees serve respectively for a term of one year, two years and three years. They shall be given priority to take their drawing taking into consideration their actual age at the time of their appointment. This arrangement is subject to successful performance review of these individual trustees.
10. Re-appointment for a second term following rotation will not be automatic. It will be linked to the performance review process to be conducted by the Nominations and Governance Committee.

11. If a Trustee is required to retire at an annual Board meeting, the retirement shall take effect upon the conclusion of the meeting.
12. Any re-appointment of a trustee shall be for a term of three years. So, the initial one-year and two-year terms aim to set the process going forward.
13. A register of years of services of individual Trustees shall be kept at IPPF's London Office.

As adopted by Governing Council, May 2020
Amended by IPPF Board of Trustees, March 2022

1.9. FINANCE, AUDIT AND RISK COMMITTEE (C-FAR) - TERMS OF REFERENCE

1. Introduction

1.1 IPPF is a UK registered charity and a worldwide Federation of 119 national Member Associations (MAs) working in over 150 countries across the globe. It is a leading civil society organisation working on issues of sexual and reproductive health and rights. IPPF's Secretariat comprises the London Office and Regional Offices in Mexico City, Brussels, Tunis, Nairobi, Kuala Lumpur and New Delhi.

1.2 IPPF's governance structure was reformed in 2020. The highest authority of the new governance structure is a General Assembly of IPPF Member Associations, convened once every three years. A Board of Trustees governs the IPPF secretariat and provides leadership for the Federation. The Board is supported by a committee system, some committees having delegated authority and others providing advice to the Board. The Nominations and Governance Committee reports directly to the General Assembly.

1.3 IPPF's core mission is to lead a locally owned, globally connected civil society movement that provides and enables services and champions sexual and reproductive health and rights for all, especially the under-served. This strategic objective is overseen by the Board of Trustees (the Board) and the General Assembly (the GA).

2. Function and Purpose

Reporting to the Board of Trustees, the expert committee monitors IPPF's financial performance ensuring the financial integrity of the organisation; oversees risk management ensuring effective internal control systems are in place; recommends the appointment of the external auditors to the Board; appoint the internal auditors; review and approve the work of both the external and internal auditors; and ensure timely and appropriate responses to audit findings and recommendations.

3. Main responsibilities and tasks of the Committee

The Committee shall have the following functions and responsibilities:

3.1 In relation to finance

Financial Management:

a) Ensure appropriate financial policy framework is in place to guide the IPPF's financial decision making.

b) Guide and advise trustees on financial policies, numbers and systems, in simple language, so that these are fully understood by all.

c) Review and recommend secretariat wide plans and budgets for approval by the Board of Trustees.

As part of this process, ensure these are:

- ☐ financially appraised including the key assumptions taken; and
- ☐ aligned to IPPF's short-term and long-term objectives.

d) Ensure transparency and accountability regarding resource allocation in accordance with IPPF's guidelines and policies.
e) Ensure compliance with accounting and reporting requirements as set out in the Charities (Accounts and Reports) Regulations 2015 and the SORP guidelines.

Management Reporting:
a) Ensure a high standard of financial oversight is maintained in order to safeguard IPPF's assets. This will include:
   - Overview of the management accounts of the organization
   - Overview of the forecasting processes and forecasted numbers.
   - Ensure appropriate budgetary controls are in place.

Statutory Financial Reporting:
a) Provide oversight of preparation and scrutiny of annual accounts of the charity (in line with the Statement of Financial Activities (SOFA), presenting the annual financial statement to the Board.
b) Guide and advise fellow trustees to formally approve the annual report and audited accounts.

Reserves Policy:
a) Develop and maintain oversight on the reserves policy to safeguard the organization's finances and ensure its ongoing solvency.
b) Work with the management on regularly undertaking a risk-based assessment of the organizations' general reserves levels.
c) Keep the Board informed of the reserves position from time to time and advise it to cope with changing circumstances.

Financial Governance:
a) Ensure proper accounting records are kept, financial resources are controlled, invested and economically spent in line with governance, legal and regulatory requirements.
b) Advise on the financial implications of the charity's strategic plans.
c) Lead in the development and implementation of financial policies including for cost management, investment management, cost recoveries, etc.
d) Approval of the schedule of delegated financial authority.

3.2 In relation to audit

a) Recommend to the Board of Trustees the appointment of the external auditors once every 3 years and recommend for annual re-appointment.
b) Approve:
   - appointment of internal auditors and intimate to the Board of Trustees.
   - revision of external/ internal auditors' fee, based on revision of audit programme, if required. Intimate the same to the Board.
   - annual external and internal audit plans. This includes actions required to be taken under the global assurance programme.

   Intimate the Board of Trustees about these approvals.

c) Board level liaison with external and internal auditors.

d) Receive reports from the internal and external auditors and review and monitor the response and actions taken by management
e) Ensure timely and appropriate responses to audit findings and recommendations.

3.3 In relation to risk

a) Review the annual risk management plan and recommend it to the Board of Trustees for approval.
b) Provide oversight to risk management processes ensuring an adequate risk management and assurance framework is in place.
c) As part of the overall risk assurance framework, provide oversight on implementation of policies and guidelines relating to Safeguarding and Financial Crime.

4. Membership of the Finance, Audit and Risk Committee

4.1 The Committee shall be comprised of up to 7 members of which at least 50% shall be women and at least 20% young persons under the age of 25 at the time of their appointment.
4.2 A majority of members shall be from Member Associations.
4.3 Consideration will be given to geographical diversity and to smaller and larger Member Associations from different national contexts.
4.4 Committee members must meet required standards of expertise, skills and experience according to established criteria. A majority of its members must have relevant experience in finance, law, investment, audit, and risk management.
4.5 There shall be at least one, and a maximum of two, members of the Board of Trustees on the committee. A minimum of one of these shall be an external Trustee of the BOT. Both members will be appointed by the Board of Trustees.
4.6 Committee members, other than those serving as Trustees, are selected by the Nominations and Governance Committee.
4.7 Of the seven members a maximum of two members can be external members. External members are selected by the Nominations and Governance Committee for a specific skill set, as expressed by the Chair of the Committee and are external to MAs.
4.8 Committee members cannot be employees of either the IPPF secretariat or any IPPF Member Association or Collaborative Partner.
4.9 Every three years at least two members (2/7) of this committee will rotate off.
4.10 A retired or a former employee or an agent (a person who has authority to act on behalf of another. This includes employees, contractors, professional advisers, etc.) of the Secretariat or of a Member Association shall only apply to become a member of any Board committee following a cooling off period of six months from the end of their respective service.
4.11 A former or a current member of a board committee shall only apply to become an employee of the Secretariat or of a Member Association following a cooling off period of six months from the end of their board committee membership.

5. Terms of Office

5.1 Committee members serve for terms of up to three years. Members may serve for a second term. Committee members are ineligible to re-stand for the committee at any time in the future after having served cumulatively for two terms.
5.2 Committee members must meet the following criteria in order to be re-appointed - regular attendance at meetings, participation and value contributions during meetings and contribution as an ambassador for IPPF. These criteria form the basis of an annual evaluation process.
5.3 Members' terms are staggered in order to maintain continuity of organizational knowledge and expertise within the committee. The Board of Trustees may determine the order in which the members rotate off the committee.

6. Committee Chair

6.1 The Chair of the Committee shall be an external member of the Board of Trustees.

6.2 The Chair is approved by the Board of Trustees.
6.3 The Chair leads the committee to enable it to fulfil its purpose, chairs meetings of the Committee ensuring that business is dealt with, decisions made and adequately minuted and that the implementation of decisions is clearly assigned and monitored.
6.4 The Chair reports to the Board of Trustees on the deliberations and decisions of the committee.

7 Committee Meetings and Quorum

7.1 The Committee shall meet at least four times each year and shall follow such formal business agenda as is circulated prior to the meeting.
7.2 Meetings of the Committee shall be held in person (a maximum of twice per year) and otherwise by suitable electronic means agreed by the Committee in which all participants may communicate with all other participants.
7.3 A simple majority of committee members present in person or by electronic means shall constitute a quorum.
7.4 All meetings shall be chaired by the committee Chair. If the Chair is unable to attend a particular meeting the Chair will be expected to name another committee member to chair the meeting.
7.5 Questions arising at any committee meeting shall be decided by a simple majority of votes unless provided otherwise in the IPPF Act, Regulations or Procedural Byelaws. Every committee member shall have one vote. If the votes are equal, the chair of the meeting shall have a casting vote.
7.6 The minutes of all meetings shall, except for any information of a personal nature, be available for inspection by Member Associations and any other persons as authorized by the committee or the Board of Trustees.
7.7 The committee may, by a simple majority, take decisions between its regular meetings, by other means (including electronically).

8 Review

These terms of reference should be regularly reviewed and updated in accordance with the general policy.

As adopted by Governing Council, May 2020

Amended by IPPF Board of Trustees, November 2023

1.10 MEMBERSHIP COMMITTEE - TERMS OF REFERENCE

1. Introduction

1.1. IPPF is a UK registered charity and a worldwide Federation of 119 national Member Associations (MAs) working in over 150 countries across the globe. It is a leading civil society organisation working on issues of sexual and reproductive health and rights. IPPF's Secretariat comprises the London Office and with Regional Offices in Mexico City, Brussels, Tunis, Nairobi, Kuala Lumpur and New Delhi.

1.2. IPPF's governance structure was reformed in 2020. The highest authority of the new governance structure is a General Assembly of IPPF Member Associations, convened once every three years. A Board of Trustees governs the IPPF secretariat and provides leadership for the Federation. The Board is supported by a committee system, some committees having delegated authority and others providing advice to the Board. The Nominations and Governance Committee reports directly to the General Assembly.

1.3. IPPF's core mission is to lead a locally owned, globally connected civil society movement that provides and enables services and champions sexual and reproductive health and rights for all, especially the under-served. This strategic objective is overseen by the Board of Trustees (the Board) and the General Assembly (the GA).

2. Function and Purpose

Reporting to the Board of Trustees, the Membership Committee makes recommendations to the Board of Trustees on applications to membership of the Federation. It approves membership standards and guidelines for accreditation of Member Associations.

3. Main responsibilities and tasks of the Committee

The Committee shall have the following functions and responsibilities:

3.1 Review and make such recommendations to the Board of Trustees as it deems appropriate regarding any applications for membership of the Federation;

3.2 Consider and make such recommendations to the Board of Trustees as it deems appropriate regarding any Member Association which fails to fulfil the criteria set for IPPF's membership standards;

3.3 Approve appropriate guidelines and arrangements for the monitoring and review of the adherence of Member Associations to IPPF's approved membership standards;

3.4 Approve appropriate guidelines and arrangements for the re-accreditation of Member Associations;

3.5 Report to the Board of Trustees on the implementation and effectiveness of the matters set out at paragraphs 3.3 and 3.4;

3.6 Receive and consider any proposed amendments to IPPF's approved membership standards and report on same to the Board of Trustees;

3.7 Arbitrate on any membership conflict which arises between a Member Association and IPPF, in consultation with the Legal Counsel, and determine the manner in which such arbitration shall take place;

3.8 Recommend to the Board of Trustees the annual subscription for associate and full members and such other dues as may be decided from time to time.

4. Membership of the Committee

4.1 The Committee shall be comprised of up to 7 members of which at least 50% shall be women and at least 20% shall be young persons under the age of 25 at the time of their appointment.
4.2 A majority of members shall be from Member Associations.
4.3 Consideration will be given to geographical diversity and to smaller and larger Member Associations from different national contexts.
4.4 Committee members must meet required standards of expertise, skills and experience according to established criteria. A majority of its members must have relevant experience in membership standards.
4.5 There shall be at least one, and a maximum of two, members of the Board of Trustees on the committee. These members are nominated by the Chair of the Board of Trustees and approved by the Board.
4.6 Committee members, other than those serving as Trustees, are selected by the Nominations and Governance Committee.
4.7 Of the seven members a maximum of two members can be external members. External members are selected by the Nominations and Governance Committee for a specific skill set, as expressed by the Chair of the Committee and are external to MAs.
4.8 Committee members cannot also be employees of either the IPPF secretariat or any IPPF Member Association or Collaborative Partner.
4.9 Every three years at least two members (2/7) of this committee will rotate off.
4.10 A retired or a former employee or an agent (a person who has authority to act on behalf of another. This includes employees, contractors, professional advisers, etc.) of the Secretariat or of a Member Association shall only apply to become a member of any Board committee following a cooling off period of six months from the end of their respective service.
4.11 A former or a current member of a board committee shall only apply to become an employee of the Secretariat or of a Member Association following a cooling off period of six months from the end of their board committee membership.

5. Terms of Office

5.1 Committee members serve for terms of up to three years. Members may serve for a second term. Committee members are ineligible to re-stand for the committee at any time in the future after having served cumulatively for two terms.
5.2 Committee members must meet the following criteria in order to be re-appointed - regular attendance at meetings, participation and value contributions during meetings and contribution as an ambassador for IPPF. These criteria form the basis of an annual evaluation process.
5.3 Members' terms are staggered in order to maintain continuity of organizational knowledge and expertise within the committee. The Board of Trustees may determine the order in which the members rotate off the committee.

6. Committee Chair

6.1 The Chair of the committee shall be a Trustee.
6.2 The Chair is appointed by the Board of Trustees.
6.3 The Chair leads the committee to enable it to fulfil its purpose, chairs meetings of the Committee ensuring that business is dealt with, decisions are made and adequately minuted and that the implementation of decisions is clearly assigned and monitored.

6.4 The Chair reports to the Board of Trustees on the deliberations and decisions of the committee.

7. Committee Meetings and Quorum

7.1 The Committee shall meet at least two times each year and shall follow such formal business agenda as is circulated prior to the meeting.

7.2 Meetings of the Committee shall be held in person (maximum twice per year) or by suitable electronic means agreed by the Board in which all participants may communicate with all other participants.

7.3 A simple majority of committee members present in person or by electronic means shall constitute a quorum.

7.4 All meetings shall be chaired by the committee Chair. If the Chair is unable to attend a particular meeting the Chair will be expected to name another committee member to chair the meeting.

7.5 Questions arising at any committee meeting shall be decided by a simple majority of votes unless provided otherwise in IPPF Act, Regulations or Procedural Byelaws. Every committee member shall have one vote. If the votes are equal, the chair of the meeting shall cast the deciding vote.

7.6 The minutes of all meetings shall, except for any information of a personal nature, be available for inspection by Member Associations and any other persons as authorised by the committee or the Board of Trustees.

7.7 The committee may, by a simple majority, take decisions between its regular meetings, by other means (including electronically).

8. Review

These terms of reference should be regularly reviewed and updated in accordance with the general policy.

As adopted by Governing Council, May 2020

Amended by IPPF Board of Trustees, November 2023

1.11 POLICY STRATEGY AND INVESTMENT COMMITTEE - TERMS OF REFERENCE

1. Introduction

1.1 IPPF is a UK registered charity and a worldwide Federation of 119 national Member Associations (MAs) working in over 150 countries across the globe. It is a leading civil society organisation working on issues of sexual and reproductive health and rights. IPPF's Secretariat comprises the London Office and Regional Offices in Mexico City, Brussels, Tunis, Nairobi, Kuala Lumpur and New Delhi.

1.2 IPPF's governance structure was reformed in 2020. The highest authority of the new governance structure is a General Assembly of IPPF Member Associations, convened once every three years. A Board of Trustees governs the IPPF secretariat and provides leadership for the Federation. The Board is supported by a committee system, some committees having delegated authority and others providing advice to the Board. The Nominations and Governance Committee reports directly to the General Assembly.

1.3 IPPF's core mission is to lead a locally owned, globally connected civil society movement that provides and enables services and champions sexual and reproductive health and rights for all, especially the under-served. This strategic objective is overseen by the Board of Trustees (the Board) and the General Assembly (the GA).

2. Function and Purpose

Reporting to the Board of Trustees, the Policy, Strategy and Investment Committee works closely with management in advising on the long- and medium-term strategies and the investments required to deliver on those strategies. It supports member associations and the secretariat in shaping IPPF's international and national policy and in developing advocacy positions on issues of significance to the Federation.

3. Main responsibilities and tasks of the Committee

The Committee shall have the following functions and responsibilities:

3.1 To develop an annual policy, strategy and investment committee agenda for presentation to and approval by the Board of Trustees.

3.2 To advise the Director General on emerging policy issues and advocacy positions.

3.3 To strengthen links between global policy and country level advocacy and policy work and, when necessary, bring to the General Assembly policy matters for discussion and, where appropriate, approval. The policy and advocacy positions developed by the Committee are of an advisory nature for the Member Associations.

3.4 To work closely with management in advising the Board of Trustees on long- and medium-term strategies and business plans.

3.5 To engage with donors on investments required to deliver on IPPF's strategies and plans and to serve as a forum for discussion with donor representatives on matters relating to accountability and future broad policy and strategy matters for IPPF.

4. Membership of the Committee

4.1 The Committee shall be comprised of up to 7 members of which at least 50% shall be women and at least 20% shall be young persons under the age of 25 at the time of their appointment.

4.2 A majority of members shall be from Members Associations.

4.3 Consideration will be given to geographical diversity and to smaller and larger Member Associations from different national contexts.

4.4 Committee members must meet required standards of expertise, skills and experience according to established criteria. A majority of its members must have relevant experience in SRHR strategy and policy.

4.5 There shall be at least one, and a maximum of two, members of the Board of Trustees on the committee. These members are nominated by the Chair of the Board of Trustees and approved by the Board.

4.6 Committee members, other than those serving as Trustees, are selected by the Nominations and Governance Committee.

4.7 Of the seven members a maximum of two members can be external. External members are selected by the Nominations and Governance Committee for a specific skill set, as expressed by the Chair of the Committee and are external to MAs.

4.8 Committee members cannot also be employees of either the IPPF secretariat or any IPPF Member Association or Collaborative Partner.

4.9 Every three years at least two members (2/7) of this committee will rotate off.

4.10 A retired or a former employee or an agent (a person who has authority to act on behalf of another. This includes employees, contractors, professional advisers, etc.) of the Secretariat or of a Member Association shall only apply to become a member of any Board committee following a cooling off period of six months from the end of their respective service.

4.11 A former or a current member of a board committee shall only apply to become an employee of the Secretariat or of a Member Association following a cooling off period of six months from the end of their board committee membership.

5. Terms of Office

5.1 Committee members serve for terms of up to three years. Members may serve for a second term. Committee members are ineligible to re-stand for the Committee at any time in the future after having served cumulatively for two terms.

5.2 Committee members must meet the following criteria in order to be considered for re-appointed - regular attendance at meetings, participation and value contributions during meetings and contribution as an ambassador for IPPF. These criteria form the basis of an annual evaluation process.

5.3 Members' terms are staggered in order to maintain continuity of organisational knowledge and expertise within the committee. The Board of Trustees may determine the order in which the members rotate off the committee.

6. Committee Chair

6.1 The Chair of the Committee shall be a Trustee.

6.2 The Chair is appointed by the Board of Trustees.

6.3 The Chair leads the committee to enable it to fulfil its purpose, chairs meetings of the committee ensuring that business is dealt with, decisions made and adequately minuted and that the implementation of decisions is clearly assigned and monitored.

6.4 The Chair reports to the Board of Trustees on the deliberations and decisions of the committee.

7. Committee Meetings and Quorum

7.1 The Committee shall meet at least three times per year and shall follow such formal business agenda as is circulated prior to the meeting.

7.2 Meetings of the Committee shall be held in person (maximum once per year) or by suitable electronic means agreed by the Board in which all participants may communicate with all other participants.

7.3 A simple majority of the committee members present in person or by electronic means shall constitute a quorum.

7.4 All meetings shall be chaired by the committee Chair. If the Chair is unable to attend a particular meeting the Chair will be expected to name another committee member to chair the meeting.

7.5 Questions arising at any committee meeting shall be decided by a simple majority of votes unless provided otherwise in IPPF Act, Regulations or Procedural Byelaws. Every committee member shall have one vote. If the votes are equal, the chair of the meeting shall have a casting vote.

7.6 The minutes of all meetings shall, except for any information of a personal nature, be available for inspection by Member Associations and any other persons as authorised by the committee or the Board of Trustees.

7.7 The committee may, by a simple majority, take decisions between its regular meetings, by other means (including electronically).

8. Review

These terms of reference should be regularly reviewed and updated in accordance with the general policy.

As adopted by Governing Council, May 2020

Amended by IPPF Board of Trustees, November 2024

1.12 RESOURCE ALLOCATION AND SUSTAINABILITY TECHNICAL COMMITTEE (RASTC) - TERMS OF REFERENCE

1. Introductions

IPPF is a UK registered charity and a worldwide Federation of 119 national Member Associations (MAs) working in over 150 countries across the globe. It is a leading civil society organisation working on issues of sexual and reproductive health and rights. IPPF's Secretariat comprises of an office in London, with Regional Offices in Mexico City, Brussels, Tunis, Nairobi, Kuala Lumpur and New Delhi.

1.1 IPPF's governance structure was reformed in 2020. The highest authority of the new governance structure is a General Assembly of IPPF Member Associations, convened once every three years. A Board of Trustees governs the IPPF secretariat and provides leadership for the Federation. The Board is supported by a committee system, some committees having delegated authority and others providing advice to the Board. The Nominations and Governance Committee report directly to the General Assembly.

1.2 IPPF's core mission is to lead a locally owned, globally connected civil society movement that provides and enables services and champions sexual and reproductive health and rights for all, especially the under-served. This strategic objective is overseen by the Board of Trustees (the Board) and the General Assembly (the GA).

2. Function and Purpose

Reporting to the Board of Trustees, the Resource Allocation and Sustainability Committee is an expert committee which:

1. makes recommendations to the Board about matters relating to the allocation of unrestricted resources in the Federation under Streams 1, 2 and 3.
2. Provides recommendations to the Board on complementary funding modalities (e.g. impact investment, etc) building on proposals developed and presented by the Director General. When required, this may include review and analysis undertaken by Independent Expert Commissions, commissioned and led by the Director-General, to inform management proposals.
3. The Committee will also review Member Associations' financial sustainability focusing on a more commercial approach to running health care facilities incorporating service diversification, health financing and developing commercial mindsets. This will also include the review of the work undertaken by the Social Enterprise Acceleration Programme which supports the development of social enterprises and marketing among MAs/CPs as strategies for financial self-sufficiency.
4. The committee will also have an oversight in the Secretariat's growing individual giving programme and its partnership with the MAs to grow their own individual giving programmes to reduce dependency on institutional donors (including the development of a global framework for individual giving across the Federation). The Committee operates on the strategic level, providing oversight and giving recommendations for decisions within the defined scope provided in the current resource allocation model, the sustainability initiative and the individual giving programme.

3. Main responsibilities and tasks of the Committee

The Committee shall have the following functions and responsibilities:

3.1 Provide oversight on the implementation of the resource allocation funding model for Stream 1, 2 and 3.

This will include oversight on:

3.1.1 The process followed for implementation of the resource allocation funding model;

3.1.2 The quality of the portfolio for the Business Cases submitted by Member Associations; and

3.1.3 The portfolio of grants under Stream 2 and 3.

3.2 Provide recommendations on changes to be made to the funding model. Work to explore or review alternative funding modalities and their results shall be commissioned and led by the Director-General. This includes the development of any transition mechanisms for new resource allocation/funding models, as well as the design of appropriate governance mechanism required to oversee them. Such commission's work remains under the authority of the Director-General, who is responsible for developing proposals, and ensuring implementation. The RATSC's role is to review the outputs of this work and provide advice and recommendations to the Board.
The outcomes of such work should inform the evolution of resource allocation models and the development of the 2029 strategic plan.

3.3 Provide oversight on the implementation of the Sustainability initiative as well as the Social Enterprise Acceleration Programme.

3.4 Provide oversight on the Secretariat's individual giving programme as well as efforts to grow partnerships with the MAs in establishing their own individual giving programmes in order to diversify income sources.

4. Membership of the Resource Allocation and Sustainability Technical Committee

4.1 The Committee shall be comprised of up to 7 members of which at least 50% shall be women and at least 20% young persons under the age of 25 at the time of their appointment.

4.2 A majority of members shall be from Members Associations.

4.3 Consideration will be given to geographical diversity and to smaller and larger Member Associations from different national contexts.

4.4 Committee members will meet required standards of expertise, skills and experience according to established criteria. A majority of its membership shall come from individuals with the relevant experience in resource allocation as well as commercial, resource allocation, healthcare funding models, individual giving, impact investment, and financial sustainability.

4.5 There shall be at least one, and a maximum of two, members of the Board of Trustees on the committee. These members are nominated by the Chair of the Board of Trustees and approved by the Board.

4.6 Committee members, other than those serving as Trustees, are selected by the Nominations and Governance Committee.

4.7 Of the seven members a maximum of two members can external members. External members are selected by the Nominations and Governance Committee for a specific skill set, as expressed by the Chair of the Committee and are external to MAs.

4.8 Committee members cannot also be employees of either the IPPF secretariat or any IPPF Member Association or Collaborative Partner.

4.9 Every three years at least two members (2/7) of this committee will rotate off to allow new members to join irrespective of being internal or external members (also see 5.3).

4.10 A retired or a former employee or an agent (a person who has authority to act on behalf of another. This includes employees, contractors, professional advisers, etc.) of the Secretariat or of a Member Association shall only apply to become a member of any Board committee following a cooling off period of six months from the end of their respective service.

4.11 A former or a current member of a board committee shall only apply to become an employee of the Secretariat or of a Member Association following a cooling off period of six months from the end of their board committee membership.

5. Terms of Office

5.1 Committee members serve for terms of up to three years. Members may serve for a second term. Committee members are ineligible to re-stand for the committee at any time in the future after having served cumulatively for two terms.

5.2 Committee members must meet the following criteria in order to be re-appointed - regular attendance at meetings, participation and value contributions during meetings and contribution as an ambassador for IPPF. These criteria form the basis of an annual evaluation process. The Nomination and Governance Committee oversees any board or board committee performance review.

5.3 Members' terms are staggered in order to maintain continuity of organisational knowledge and expertise within the committee. The Board of Trustees may determine the order in which the members rotate off the committee.

6. Committee Chair

6.1 The Chair of the Committee shall be a Trustee.

6.2 The Chair is appointed by the Board of Trustees.

6.3 The Chair leads the committee to enable it to fulfil its purpose, chairs meetings of the committee ensuring that business is dealt with, decisions made and adequately minuted and that the implementation of decisions is clearly assigned and monitored.

6.4 The Chair reports to the Board of Trustees on the deliberations and decisions of the committee.

7. Committee Meetings and Quorum

7.1 The Committee shall meet at least three times per year and shall follow such formal business agenda as is circulated prior to the meeting.

7.2 Meetings of the Committee shall be held in person (maximum once per year) and otherwise by suitable electronic means agreed by the Board in which all participants may communicate with all other participants.

7.3 A simple majority of committee members present in person or by electronic means shall constitute a quorum.

7.4 All meetings shall be chaired by the committee Chair. If the Chair is unable to attend a particular meeting the Chair will be expected to name another committee member chair the meeting.

7.5 Questions arising at any Committee meeting shall be decided by a simple majority of votes unless provided otherwise in IPPF Act, Regulations or Procedural byelaws. Every committee member shall have one vote. If the votes are equal, the chair of the meeting shall cast the deciding vote.

7.6 The minutes of all meetings shall, except for any information of a personal nature, be available for inspection by Member Associations and any other persons as authorised by the committee or the Board of Trustees. The

committee may by a simple majority take decisions between its regular meetings, by other means (including electronically).

7.7 The committee will liaise closely with C-FAR and other related committees to ensure an independent and coherent report to the Board.

8. Review

These terms of reference should be regularly reviewed and updated in accordance with the general policy.

As adopted by Governing Council, May 2020

Amended by IPPF Board of Trustees, May 2026

Policy 1.13

1.13 IPPF AFFILIATION CATEGORIES

Rationale

1. This policy gives effect to the implementation of the IPPF affiliation categories (Members and Collaborative Partners) and makes clear the various responsibilities and privileges of Full, Associate Members and Collaborative Partners of IPPF.
2. The policy also provides the necessary steps to be followed by an existing Full Member which decides to become an Associate Member and also makes clear the way to handle the status of a non-member observer organization.

Introduction

3. IPPF is a volunteer led organization and has two categories of membership:
    i. Full Membership
    ii. Associate Membership
4. There are two types of Associate Members: Associate Member 1 (AM1) and Associate Member 2 (AM2). The responsibilities and privileges for these two types of Associate Members and also for Full Members and Collaborative Partners are clearly defined in the table below.

Implementation

5. Following adoption of this policy, any newly joining organization wishing to become a member will join as an Associate Member (AM1) and will need to make a decision about their future status within the Federation two years after being admitted. They will either:
    a. go through an accreditation review with a time limit of two years to fully comply with the IPPF Standards and Responsibilities of Membership in order to become a Full Member; or
    b. decide to join the second type of Associate Member (AM2).
6. Full Member Associations can become an Associate Member (AM2) under the following circumstances:
    i. a decision to change their membership status by the highest governing body of the Association
    ii. a subsequent review of the application and recommendation by the Membership Committee to the Board of Trustees.
7. When a Full Member Association becomes an Associate Member (AM2), it will remain with that status for at least two years and will need to successfully go through an accreditation review should it wish in the future to become a Full Member, as per IPPF Act and Regulations.
8. Regional Directors have the responsibility to implement this policy and to inform the Director-General who will make the necessary recommendation on membership status to the Membership Committee as per the IPPF Act and Regulations.

9. Table summarizing the different types of affiliation with IPPF

	MEMBERS			PARTNERS	
PRINCIPLES	**FULL MEMBER**	**ASSOCIATE MEMBER**		**NATIONAL/REGIONAL COLLABORATIVE PARTNERS**	**INTERNATIONAL COLLABORATIVE PARTNERS**
		AM1	**AM2**		
Subscribes to IPPF Vision, Mission, Values	Yes	Yes	Yes	Yes	Yes
Comply with IPPF Membership Standards	Yes	No	No	No	No
Comply with Governance and Constitutional Checklist	Yes	Yes	Yes	No	No
Time Limit	No	4 years	No	As per MOU terms with Region	As per Partnership Agreement with the IPPF Board of Trustees
Periodic Accreditation Review	Yes	Yes, but not before 2 years	No	No	No
Renewal of Status	After approval of re-accreditation	Yearly	Yearly	As identified by MOU with the Regional Office	As per Partnership Agreement terms and conditions
Governance: Attendance at General Assembly (GA) Meetings	Yes	Yes	Yes	No	No
Voting Rights at GA*	Yes	No	No	No	No
Core Funds Eligibility	As determined by the new Resource Allocation mechanism	As determined by the new Resource allocation mechanism	As determined by the new Resource Allocation mechanism	As determined by the new Resource Allocation mechanism	As determined by the new Resource Allocation mechanism
Restricted Funds Eligibility	Yes	Yes	Yes	Yes	Yes
Membership Fee	As deemed necessary by the Board of Trustees	As deemed necessary by the Board of Trustees	As deemed necessary by the Board of Trustees	No	No

As adopted by Governing Council, May 2011

As amended by IPPF Board of Trustees, September 2022

* As per IPPF Regulations

1.14 RISK MANAGEMENT

Introduction

Risk management is a central part of any organization's strategic management. It is a key organizational planning and monitoring tool. This policy outlines the way in which Member Associations and the Secretariat of IPPF should address risk management.

Definitions

Risk

Risk is measured in terms of the probability of an event occurring and its negative consequences.

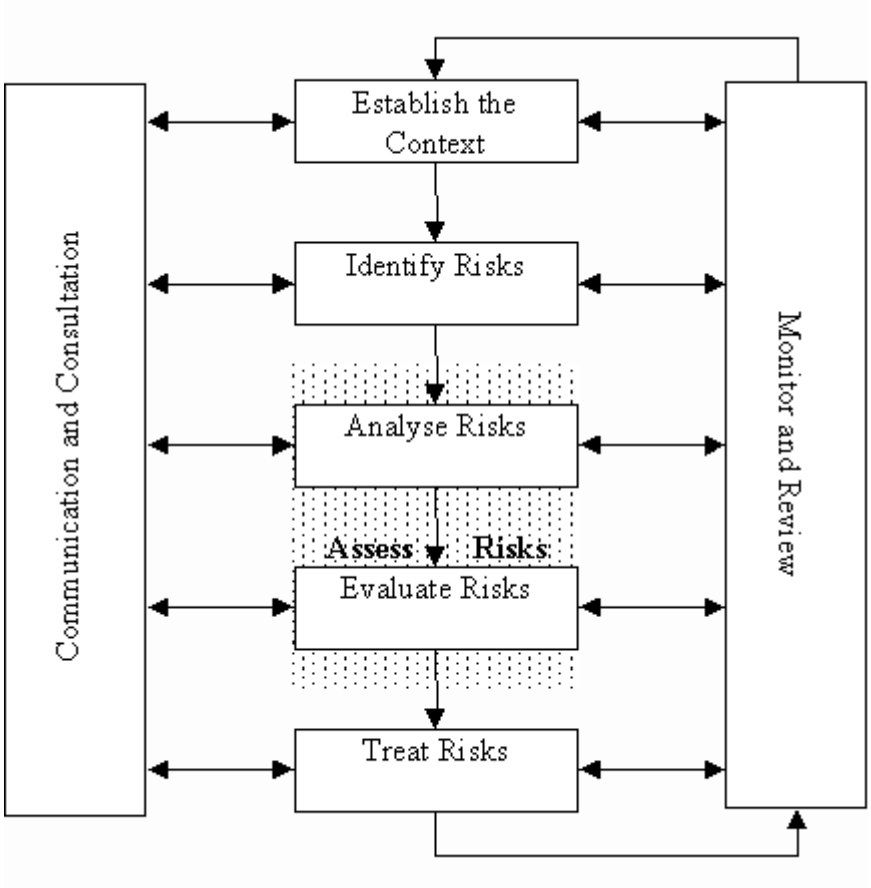
Risk Assessment

Risk assessment is the overall process of risk analysis and evaluation based on the chance of something happening that will have a negative impact on the achievement of the organization's objectives. This is the shaded component of the diagram.

Risk Management

Risk management is the culture, processes and structures that are directed towards the effective management of potential opportunities and adverse effects within the organization's environment.

Diagrammatically, the risk management process is depicted in the following flow-diagram:



Risk Management Process

Risk management process is the systematic application of management policies, procedures and practices in relation to risk. It is a continuous process of identifying, analysing, evaluating, treating, monitoring and communicating risk so that it becomes a basis on which the organization is managed. The process involves the Governing Body, Senior Management and other staff.

Risk Register

A risk register is a document which lists the most important risks facing the organization together with the likelihood and impact of those negative events occurring. The document should include details of steps which have or will be taken to reduce the impact should the risk occur.

Principles

1. The focus of good risk management is the identification of and treatment of organizational risks. The objective is to add value to all the activities of the organization.
2. Risk management should be a continuous and dynamic process which runs throughout the organization's strategy and implementation of that strategy.
3. It should address methodically all the risks surrounding the organization's past, present and, in particular, future activities.
4. Effective risk management requires a reporting and review structure to ensure that risks are effectively identified and assessed and that appropriate controls and responses are in place. This structure should involve the Governing Body and Senior

Management. Senior Management should ensure that an effective system is in place to manage the risks. The Governing Body takes the lead on reviewing the risk register and ensuring that senior management have suitable plans in place to treat risks where controls were identified as inadequate.

5. Where internal audit operates, their work should be focused on the significant risks identified in order to provide Management and the Governing Body with periodic assessments that these are being adequately managed.

Major risks

Most organizations face similar major risks and these can be summarized as:

- Change in political environment
- Change in legislation
- Change in strategic direction
- Reduced income
- Lack of financial sustainability
- Loss of reputation
- Ineffective governance
- Ineffective management
- Inadequate staffing and skills
- Information technology failure (hardware / software)
- Major incident response (terrorism / flood / fire / disease).

Implementation

For Member Associations:

6. Member Associations are encouraged to adopt a clear risk management process outlining the roles that the Governing Body and Senior Management should undertake. The Governing Body should approve a risk management policy.
7. Member Associations are encouraged to include risk management within their strategic planning process.
8. Associations should document the main risks facing the organization and ensure that controls are in place to minimize the financial impact of risks. The Governing Body should approve on an annual basis the most important risks facing the organization. It is considered good practice for each Governing Body meeting to review the risk register as a standing item on the agenda. This should include follow-up on actions taken from the previous year to the risk register.
9. Senior Management shall promote a systematic and consistent approach to risk by ensuring that risks are assessed and considered as part of the day-to-day management of the organization.
10. Where Internal Audit are in place they should utilize the results of the annual risk assessment to plan their work and provide an assurance to the Governing Body that controls are in place to minimize these risks.

For the Secretariat:

11. The Director-General shall ensure that a comprehensive risk register is in place for the Secretariat. This shall identify the major risks and the controls in place to

minimize and monitor those risks.

12. The Director-General shall present to the Board of Trustees on an annual basis the most significant important risks facing the organization.
13. The Board of Trustees will review on an annual basis the Secretariat risk register, including follow up on actions taken from the previous year to the risk register. This will be after a detailed review by the IPPF Finance, Audit and Risk Committee.
14. In case requested by the Member Associations, the Regional Offices will facilitate assistance to Member Associations in developing a strong risk management policy and procedure within their organizations.
15. Senior Management shall promote a systematic and consistent approach to risk by ensuring that risks are assessed and considered as part of the day-to-day management of the organization. They shall also ensure that controls are in place to minimize the financial impact of risks.
16. Internal Audit will utilize the results of the annual risk assessment to plan their work and provide an assurance to the Audit Committee that controls are in place to minimize these risks.

As adopted by Governing Council, November 2007

As amended by the Board of Trustees, June 2024

THE FEDERATION

Policy 1.15

1.15 SAFETY AND SECURITY RISK MANAGEMENT

Introduction

1. IPPF is committed to enhancing the safety and security of volunteers, staff, visitors, contractors and other stakeholders. By adopting good practice safety and security risk management (**SSRM**) we strive to minimise risks. As a result, our performance will be enhanced, and individuals will be best able to contribute to their fullest potential. Our clients will be provided with more sustainable access to sexual and reproductive health services. By adopting this policy, we also seek to ensure that we meet our duty of care, by doing everything reasonable and practicable to reduce the risk of harm to those working for, or operating on behalf of, the Federation. Implementation of this policy contributes to meeting risk management best practices.

2. **Definitions**

Safety hazards include naturally occurring phenomena (drought, earthquake, epidemic, flood etc), illness and accidents.

Security threats always have a human origin. They include acts of violence and criminality including terrorism.

Safety and security incidents can result in harm or injury to our people, loss or damage to our property or programmes, and/or negative repercussions for the Federation as a whole, in terms of its reputation and donor responses.

Duty of care refers to the legal and moral obligation of the organization to take all possible measures (to do everything reasonable and practicable) to reduce the risk of harm to those working for, or operating on behalf of, the organization.

Safety and Security Risk Management is defined as a dynamic process that assists in assessing the context we operate in (*country, city/town, clinic, office location, room, mobile unit*). It identifies the risk level from potential undesirable safety or security events to stakeholders (volunteers, staff, *visitors and contractors*), assets and operations, and provides guidance on solutions to lower the risks associated with such events. It does not make operations 'safe or secure' but ensures risks are minimised to an acceptable level to meet duty of care.

Further explanation of terms used in relation to this policy are found in **Annex A**

Safety and Security Values

3. Safety and security values (see **Annex B**) are essential in empowering those associated with IPPF's work, with a guide as to how to react in any situation. They underlie the policy, and its associated plans, and should be adopted by all stakeholders, but especially those responsible for establishing and maintaining safety and security management systems:

- Responsibility and accountability for yourself, and for others
- Right to say no: safety first
- Local action orientated decision-making
- Need to share information

Guiding Principles to Safety and Security at IPPF

4. The Member Associations and Secretariat of IPPF are guided by the following principles in relation to safety and security risk management:

I. **Mainstreaming:** Safety and security risk management contributes to the overall management process. As a continuous and dynamic process, it runs through all organizational processes. It helps decision-makers make informed choices, prioritize actions and distinguish between alternative courses of action. It should be transparent and inclusive. By its nature it is dynamic, iterative and responsive to change. As external and internal events occur, the context and knowledge change, monitoring and review must take place, and changes in levels of risk associated with threats and hazards should be tracked by those responsible for the system. In this way constant inputs will create stable outcomes, with minimal incidents.

II. **Duty of Care**: Duty of care requirements should take into account volunteers, staff, contractors and visitors. Whilst the legal relationship between them and our organization(s) (the Federation/ Member Associations) may differ it is important that consideration is given to both moral and legal obligations as reputational damage can occur regardless.

III. **Priority:** In extreme situations, the safety and security of individuals is ultimately a higher priority than the protection of property/vehicles/assets, the preservation of programmes or the expression of advocacy objectives.

IV. **Responsibility:** Governing Bodies are ultimately responsible for ensuring safety and security risk management. Responsibility for ensuring the safety and security of staff and contractors lies in the line management structure. However, all volunteers, staff, contractors and visitors should also realise they have a responsibility for safety and security. Special responsibilities should be given to designated Security Focal Points throughout the Federation to manage risks on an on-going basis and to respond as and when required to incident and/or crisis management situations. Enhanced and up-to-date training and on-going support for such roles is necessary.

V. **Discipline:** It is the responsibility of all stakeholders to adhere and contribute to Safety and Security Risk Management Plans and to immediately report breaches or non-compliance. Decision-making authority is to be respected with disciplinary action taken where safety and security plans, and guidance, are not followed.

VI. **Right to Withdraw:** Irrespective of the risk management in place, any volunteer, staff, contractor or visitor may decline to operate in an insecure area and may withdraw, having made every effort to inform their manager or equivalent. This demonstrates safety first.

VII. **Behaviour:** volunteers, staff, contractors and visitors should be sensitive and respectful to local culture. They should reflect IPPF values in their interactions by refraining from coercive or exploitative behaviour, including trafficking in persons[1], this is particularly critical in complex humanitarian contexts[2&3].

VIII. **Gender:** Individuals in the same context, may perceive risk differently or face different exposure to safety hazards and security threats, based on their gender,

[1] The recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation, United Nationals Protocol to Prevent, Suppress and Punish Trafficking in Persons – UN General Assembly 2000

[2] Code Conduct for the International Red Cross and Red Crescent Movement and NGOs in Disaster Relief, the Humanitarian Charter and Minimum Standards in Disaster Response and the HAP Principles of Accountability

[3] UN Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children (2000), also cited at https://www.amnesty.org/en/documents/pol30/4062/2016/en/

sexual orientation and gender identify. As such each individual can approach the same situation with different vulnerabilities and respond differently to actual or perceived threats. Despite women and men being equal, women in their diversity are disproportionately affected by some security threats with exposure to sexual and gender-based violence often a high risk. It is necessary therefore to put in place measures to reduce risk and promote resilience[4]. As a result, sometimes provisions must be made for different genders in order to manage risks to acceptable levels. Individual concerns about safety and security must be heard and taken seriously. All IPPF risk management should be viewed through a gender lens and be considered part of our gender mainstreaming activities.

IX. **Involvement with Arms:** In the course of their IPPF duties, volunteers, staff, contractors and visitors must not carry or take up weapons or arms under any circumstances.

X. **Armed groups and armed escorts:** Armed personnel must not be allowed in IPPF premises or vehicles, except in an emergency situation and/or where specific threats requiring such a response are explicitly agreed or imposed (this does not preclude the law enforcement personnel of a country, who are armed entering IPPF premises as part of their role and duties). Armed escorts would not be considered as the most effective way of mitigating risks except in emergency situations where there has been a sudden and unexpected deterioration in the external environment.

Safety and Security Management System

5. The IPPF safety and security risk management system (**Annex C**) is a process documented in our standard Safety and Security Risk Management (**SSRM**) Plans. The SSRM Plan demonstrates how safety and security risks are being managed. It recognizes that many individual decisions will continue to be taken instinctively, but should also be guided by this policy, and our security values. As a learning organization, IPPF wish to systematically attempt to anticipate negative events, and be more resilient in managing them when they do occur. Through our safety and security risk management our aim is to reduce the likelihood of incidents occurring; but when they do, to reduce their impact. In this way we will minimize the risk from safety hazards and security threats. By ensuring lessons from negative events are obtained it is then possible to take actions to avoid these in the future. The Member Associations and the Secretariat must develop such documented SSRM systems, in order to meet duty of care requirements. For many donors their funding will also require that such systems are evidenced as a pre-requisite for eligibility, this is particularly so for funding directed to humanitarian contexts.

Policy Implementation

6. Each IPPF Secretariat office and Member Association will:

i. Adopt a safety and security risk management process, documented in a standard template, with the roles of the Governing Body, Senior Management and other staff responsible for managing safety and security risks outlined. Security Focal Point roles will be identified and adequately trained.

ii. Produce a SSRM Plan, and a stand-alone safety and security risk register that are updated on a regular basis. Comprehensive risk assessments should be undertaken. Events deemed as posing significant risk will be reviewed through a vulnerability analysis to understand how and why the Member Association / Secretariat and its volunteers, staff, contractors, visitors and other stakeholders are exposed to these security threats and safety hazards. The vulnerability assessment will inform risk

[4] Guidelines for Integrating Gender Based Violence in Humanitarian Action, Inter-Agency Steering Committee, Global Protection Cluster, 2015

treatments that should aim to do everything possible to minimize risks, and thereby meet duty of care. In arriving at suitable risk mitigation, consideration should be given to a mix of all three security strategies (see **Annex A glossary**).

iii. Document the risk treatments (controls) associated with the key events and prioritize the immediate management actions to be taken, together with longer-term controls to be developed. The controls can include standard operating procedures and contingency plans to help mitigate and control risks. The Governing Body should approve on an annual basis the levels of residual risks facing the organization and its people from the main events that have been anticipated. It is considered good practice for each Governing Body meeting to review the safety and security risk register as a standing item on the agenda. This should include follow-up on actions.

iv. Ensure that safety and security risk management is mainstreamed into all aspects of management, including human resource, programme planning and budgeting, and that regular monitoring and review is undertaken to ensure suitability, adequacy and effectiveness.

v. Ensure that organizational culture encourages and facilitates an environment where safety and security values are respected and that learning from events takes place.

vi. Provide suitable and sufficient information, instruction, training and facilities to ensure awareness of and competency in discharging security responsibilities taking into account enhanced needs for those operating in humanitarian/ emergency response and conflict settings.

7. IPPF Secretariat will use all available mechanism in the Federation to periodically and consistently monitor implementation and review the policy statement. The Secretariat will prioritize support to Member Associations assessed to have the highest safety and security risks, in order to meet duty of care requirements. They will make available best practice through templates and toolkits tailored for the contexts in which IPPF operate within. The implementation of this statement should be adequately resourced and supported by the Secretariat.

Annex A

Glossary of Terms

Duty of care: Legal and moral obligation of the organization to take all possible measures (to do everything reasonable and practicable) to reduce the risk of harm to those working for, or operating on behalf of, the organization.

Risk: the effect of uncertainty upon objectives (general definition). In safety and security risk management terms, risk is thought of as how an event, either a safety hazard or security threat, could affect the organization, its volunteers, staff, contractors, visitors, assets, reputation or programmes. Usually, the effect is considered as a negative outcome, and the intent of safety and security risk management is to minimize this.

Residual Risk: the risk remaining after risk treatment

Risk treatment: all processes to modify initial risk levels assessed from threats and hazards. Risk treatment is also referred to as risk mitigation or reduction.

Security Strategies: generic approaches to reducing risk from identified security threats. Typically, three are considered: acceptance, deterrence and protection.

- **Acceptance:** Building a safe operating environment through the consent, approval and cooperation from individuals, communities and local authorities.
- **Deterrence:** Reducing the risk by containing the threat with a counter threat (e.g. armed protection, a communicated counter-threat, diplomatic/political leverage, temporary suspension).
- **Protection:** Reducing the risk, but not the threat by reducing the vulnerability of the organization (e.g. fences, guards, walls).

Threat: Any security event that may negatively affect an organization, its staff, assets, reputation or programme that exists in the context where you operate. It can also be considered to be a potential act or physical item, that may result in harm or injury to staff; loss or damage to property, or a negative outcome for the organisation. The source of security threats are usually other people who usually have a negative intent towards the potential victims, and threats include acts of violence and criminality.

Hazard: Any safety event that may negatively affect an organization, its staff, assets, reputation or programme that exists in the context where you operate. Safety hazards include naturally occurring phenomena, illness and accidents.

Vulnerability: The organization's exposure to a threat or hazard. It will vary depending on the nature of the organization, how it works, what programmes it undertakes, its staff and ability to manage risks.

Annex B

IPPF Safety & Security Values

Responsibility and accountability for yourself, and for others

Your primary safety and security risk management resource is yourself**. <u>You</u> are responsible for managing risks and making sure they remain acceptable.** IPPF will assist, support and equip you to be able to do this. Beyond this, all have a clear responsibility for each other, and the Federation, as a whole. We need to be mutually accountable. We may also need to act and intervene in a situation, no matter how difficult or awkward this might be at the time in order to prevent threats and hazards occurring.

Right to say no: safety first

All volunteers, staff, contractors and visitors have **the right to withdraw** from a risky situation or event should they feel the risks are unacceptable, or they are experiencing fear. We will make sure that those exposed to risk are able to make **an informed choice** about the level of risk they are being exposed to. IPPF values its people above its programmes and assets. Safety First!

Local action orientated decision-making

We acknowledge that **those closest to a safety and security situation will often be able to come up with the best solution, and we trust our people to do so.** Risk management needs **timely and action-centred responses**. IPPF will empower our people to act quickly and responsibly. No one will be penalised for taking immediate action when to do nothing appeared a higher risk course of action. Our systems and processes will ensure critical information is gathered and analysed. Local decision will take account of the different risks that volunteers, staff, contractors and visitors who do not live within that community may face.

Need to share information

All volunteers, staff, contractors and visitors have **an obligation to pass on safety and security related information**. IPPF encourages such openness because it provides learning opportunities from both events that occur as well as 'near-miss' incident reporting.

Safety and Security Management System Components **Annex C**

Component	Purpose	Responsibility of
Safety and Security Policy	IPPF Policy in relation to Safety and Security. Member Associations can adopt this or tailor a version applicable to their local context.	Board of Trustees / Governing Body of Member Association
Global Safety and Security Risk Register: • **Risk assessment** • **Vulnerability analysis** • **Security strategies**	Risk Assessment of safety and security threats and hazards. Feeds into the overall Risk Register for the organization.	Director-General/ ED of the Member Association Overall risk register approved by the Board of Trustees / Governing Body of Member Association
Safety and Security Risk Management Plan; includes - **local risk registers for different territories and business units** - **Incident logs**	Risk management documentation including mission, mandate, context and situation assessments, risk assessments, risk register, risk treatment documentation (both immediate management actions, standard operating procedures and contingency plans), incident reports and logs, and supporting documentation	Senior Management / Security Focal Point
Safety and Security Training	Training directed to volunteers, staff, contractors and training as applicable	Senior Management / Security Focal Point

As adopted by Governing Council, November 2016

1.16 CODE OF CONDUCT

Introduction

1. IPPF is committed to a human rights framework which prohibits any discrimination, exclusion or restriction on the basis of age, sex, sexual orientation, gender, gender identity or expression, race, ethnic or national origin, religion or belief, partnership status, pregnancy or parental status, disability health or any other analogous personal status.[1]
2. IPPF recognizes that the right to be free from abuse, exploitation and harassment is enshrined in international human rights law namely ICERD, ICCPR, ICESCR, CEDAW, CAT, CRC, CRPD.[2] IPPF additionally acknowledges that sexual harassment and abuse is a form of gender based violence.
3. In keeping with its vision and values, IPPF is committed to maintaining the highest degree of ethical conduct amongst all its volunteers, trustees and staff.[3] To help increase understanding, this Code of Conduct details IPPF's expectations of all involved in IPPF's work.
4. This Code of Conduct is intended to set out the guiding principles and values applicable to all elements of IPPF (its Secretariat, Member Associations, members of the General Assembly, Nominations and Governance Committee, Board of Trustees, Finance, Audit & Risk Committee, Membership Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee and governing bodies of Member Associations). These guiding principles and values need to be implemented through the relevant regional and local policies and procedures.

Purpose and Scope

5. IPPF adopts this Code of Conduct as part of its commitment to providing the best possible environment for those providing IPPF services and those engaging with IPPF services and activities.
6. IPPF recognizes the need to provide an environment able to address inherent unequal power dynamics.
7. The purpose of this Code of Conduct is to enable greater individual accountability by providing clear guidance on what is expected of IPPF volunteers, trustees and staff, while on organizational premises, attending organizational functions or otherwise performing IPPF related activities.
8. Whilst recognizing that local laws and cultures may differ from one country to another, IPPF is an international non-governmental organization, and therefore the

[1] Equality, Diversity and Inclusion Policy

[2] International Convention on the Elimination of All Forms of Racial Discrimination, International Covenant on Civil and Political Rights, International Covenant on Economic, Social and Cultural Rights, Convention on the Elimination of All Forms of Discrimination against Women, Convention against Torture and Other Cruel, inhuman or Degrading treatment or Punishment, Convention on the Rights of the Child, Convention on the Rights of Persons with Disabilities.

[3] Staff refers to all paid staff: permanent, fixed term and temporary staff; it includes employees, agency workers, consultants, interns and contractors.

Code of Conduct is based on international human rights standards. IPPF volunteers, trustees and staff are expected to uphold local law wherever they operate, except where the Code of Conduct is more stringent, in which case the Code applies.

9. The policy lays out the commitments made by IPPF, and applies to all volunteers, trustees and staff of IPPF Secretariat, its Member Associations and collaborative partners including members of the General Assembly, Nominations and Governance Committee, Board of Trustees, Finance, Audit & Risk Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee and governing bodies of Member Associations as well as to collaborative and other partners, contractors and suppliers.

Mission and values

10. IPPF works to ensure people are free to make choices about their sexuality and well-being, in a world without discrimination. IPPF leads a locally owned, globally connected civil society movement that provides and enables services and champions sexual and reproductive health and rights for all, especially the under- served. IPPF does this based on its core values of social inclusion, diversity, passion, volunteerism and accountability. IPPF's Code of Conduct is framed to take account of our vision, mission and values.

Code of Conduct Standards

IPPF volunteers, trustees and staff as defined in paragraph 9 above, are required to:

11. **Uphold the integrity and reputation of IPPF by ensuring that professional and personal conduct is consistent with IPPF's values and standards**

i. treat all people fairly with respect and dignity;
ii. when working in an international context or travelling internationally on behalf of IPPF, be observant of all local laws and be sensitive to local customs;
iii. ensure that individual conduct does not bring IPPF into disrepute and does not impact on or undermine the ability to undertake the role for which engaged;
iv. not work when incapacitated by alcohol or other intoxicating substances or use, or be in possession of, illegal substances on IPPF premises or accommodation.

12. **Not engage in abusive or exploitative conduct**

v. not engage in sexual activity with children (persons under the age of 18). Mistaken belief in the age of a child is not a defence;[4]
vi. not engage in any sexual relationships with beneficiaries of assistance, since they are based on inherently unequal power dynamics;
vii. not engage in any exploitative activities with children or vulnerable adults including those that are commercial such as child labour or trafficking;
viii. not physically assault a child or vulnerable adult;
ix. not emotionally or psychologically abuse a child or vulnerable adult.

[4] This prohibition does not apply to IPPF youth volunteers who are in a consensual relationship, with each other and are under the age of 18 but over the applicable age of majority or consent

13. **Ensure the safety, health and welfare of all IPPF volunteers, trustees, staff and communities**

x. adhere to all legal and organizational health and safety requirements in force at the location of their work;

xi. comply with any local security guidelines and be pro-active in informing management of any necessary changes to such guidelines;

xii. behave in a manner such as to avoid any unnecessary risk to the safety, health and welfare of themselves and others, including partner organizations and communities with whom IPPF works;

xiii. be responsible with social media accounts and, when using photos obtained during IPPF work, always gain informed consent and preserve the privacy and dignity of all individuals, ensuring that they are not exposed to risk from the use of their image.[5]

14. **Not behave in any way which has the purpose or effect of violating an individual's dignity or creating an intimidating, hostile, degrading, humiliating or offensive working environment for that individual**

xiv. be respectful and considerate in behaviour to all, particularly in the working environment;

xv. not engage in sexual relationships with volunteers, trustees and staff, who are in direct line of supervision;

xvi. declare as soon as potential conflict of interest may arise to supervisor or Human Resources, if in a relationship with a volunteer, trustee, staff member (where there is no direct line of supervision). As long as relationships are conducted appropriately, such disclosures will be treated confidentially;[6]

xvii. not behave in such a way as to indicate that sexual favours may provide a basis for work-related advancement, or a way in which to avoid work-related detriment;

xviii. not to be inappropriately tactile or flirtatious or sexually explicit in the workplace;

xix. not use offensive language or belittle or humiliate volunteers, trustees, staff or beneficiaries;

xx. not victimize volunteers, trustees, staff or beneficiaries for speaking up or raising complaints;

xxi. not abuse any position of power;

xxii. adhere to workplace behaviour expectations as set out in Respect at Work policy.

15. **Be responsible for the use of information, assets and resources to which they have access by reason of working with IPPF in any capacity**

xxiii. be accountable for all IPPF money and property given to them and ensure that IPPF assets and resources are used in a responsible manner;

xxiv. not use IPPF IT equipment, software, e-mail or social media platforms to engage in activity that is illegal under local or international law or that

[5] For which there must be an IPPF signed consent form. See the Media Policy and guidance for further details.

[6] Work decisions must not be made based on that relationship. This may include staff who share responsibility for sign-off on the same budget lines; or are involved in carrying out joint decision-making relating to resourcing or programme issues; or are carrying out or acting as decision makers for internal investigative processes

encourages conduct that would constitute a criminal offence. This includes any material that intimidates or harasses any group defined by reference to the characteristics set out in paragraph 1 of this Code of Conduct;

xxv. not use IPPF IT equipment to view, download, create, distribute or save in any format inappropriate or abusive material including but not limited to pornography or depictions of child abuse.

16. **Perform their duties and conduct their private life in a manner that avoids conflicts of interest**

xxvi. declare any financial or personal interest in matters of official business which may impact on the work of IPPF. For the avoidance of doubt, a "personal interest" is any sort of interest which might cause a reasonable person to be concerned that in individual's decision-making might be influenced by that interest. Such an interest might include the financial or other interests of an individual's spouse, partner or co-habitee, parent, grandparent, sibling, child, grandchild, in-law or close intimate of which the individual is aware;

xxvii. not be involved in awarding benefits, contracts for goods or services, employment or promotion within IPPF, to any person with whom they have a financial, personal, family or close intimate relationship, or in any other circumstances which might cause a reasonable person to be concerned that the individual's decision-making might be influenced by any financial or personal interest;

xxviii. make a declaration and follow the Conflict of Interest Policy with regards to being nominated as a prospective candidate or another official role for any political party;

xxix. not accept significant gifts or any remuneration from governments, communities, individuals with whom IPPF work, donors, suppliers and other persons which have been offered as a result of working with IPPF in any capacity.

17. **Uphold confidentiality**

Exercise due care in all matters of official business, and not divulge any confidential information relating to colleagues, work-related matters or any sensitive information unless legally required to do so. Adhere to the principles set out in the Confidentially and Information Sharing Policy.

Complaints and reports

18. IPPF volunteers, trustees and staff as defined in paragraph 9 above are obligated to bring to the attention of the supervisor any potential incident, abuse or concern that they witness, are made aware of, or suspect, which appears to breach the standards contained in this Code unless they are the recipient of behaviour such as that outlined in paragraph 14 above, or have been informed in confidence of such behaviour by one or more recipients thereof.

19. IPPF staff who report concerns will be protected as whistle-blowers in line with the Raising a Concern Policy.

20. If the volunteer, trustee or staff member does not feel comfortable reporting to their supervisor they can use IPPF SafeReport, IPPF's external incident reporting service.

21. Supervisors receiving reports or concerns, other than reports made in confidence by a recipient of behaviour such as that outlined in paragraph 14 above, are obliged to refer the report immediately to the relevant incident reporting mechanism. Supervisors who are informed in confidence by a recipient of behaviour such as that outlined in paragraph 14 above of that behaviour should seek where appropriate to persuade the recipient of that behaviour to report it to IPPF.

Enforcement

22. The respective management of IPPF Secretariat and Member Associations have a responsibility to ensure that all staff understand and adhere to this Code of Conduct.
23. The Code of Conduct forms part of all contracts of employment. Breaches of the Code of Conduct by staff are grounds for disciplinary action, up to and including dismissal.
24. This Code of Conduct is also applicable to trustees, volunteers, partners, contractors and suppliers as set out at paragraph 9 above. Breaches of the Code of Conduct may result in the termination of contracts or trustee and volunteer roles.
25. Failure of a Membership Association to implement and monitor the implementation of this Code of Conduct shall engage section 9 of IPPF Act and Regulations on Suspension and Expulsion of Member Associations and Members of the Board of Trustees.
26. Failure of a partner organization to implement and monitor the implementation of this Code of Conduct may result in the termination of contract.

Related policies

- Confidentiality and Information Sharing
- Fraud Policy
- Safeguarding Policy (Children and Vulnerable Adults)
- Respect at Work Policy
- Gender Equality Policy
- Equality, Diversity and Inclusion

In accepting my position at IPPF, I undertake to discharge my duties and to regulate my conduct in accordance with the requirements of this Code.

Name: Role:

Signature: Date:

As adopted by Governing Council, November 2018

Last amended by Governing Council, May 2020

1.17 SAFEGUARDING (CHILDREN AND VULNERABLE ADULTS)

Introduction

1. IPPF believes that everyone we come into contact with has the right to be protected from all forms of harm, abuse, neglect and exploitation, regardless of their age, sex, sexual orientation, gender, gender identity or expression, race, ethnic or national origin, religion or belief, partnership status, pregnancy or parental status, disability, health or any other status. IPPF will not tolerate abuse or exploitation by volunteers, trustees, staff[1] or anyone associated with IPPF.
2. IPPF recognises that the right to be free from abuse, exploitation and harassment is enshrined in international human rights law namely ICERD, ICCPR, ICESCR, CEDAW, CAT, CRC, CRPD[2]. IPPF additionally recognises that the sexual exploitation and abuse are a form of gender based violence.
3. IPPF's commitment to ensuring sexual rights for all includes a commitment to freedom and protection from harm. The focus on youth lays at the core of IPPF's work.
4. IPPF believes that creating a safe environment for all children, young people and vulnerable adults requires the cooperation of all volunteers, trustees, and staff. It is the responsibility of all to raise any safeguarding concerns they have or that are reported to them.
5. IPPF commits to addressing safeguarding throughout its work, through prevention, reporting and response.

Purpose and Scope

6. The purpose of this policy is to protect children and vulnerable adults from abuse and exploitation that may be caused due to their coming into contact with IPPF through
    a. The conduct of volunteers, trustees, staff of the Secretariat and Member Associations, collaborative partners, other partners and anyone associated with IPPF;
    b. The design and implementation of IPPF's programmes and activities.
7. The policy lays out the commitments made by IPPF, and applies to all volunteers, trustees and staff of IPPF Secretariat, its Member Associations and collaborative partners including members of the General Assembly, Nominations and Governance Committee, Board of Trustees, Finance, Audit & Risk Committee, Membership Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee , and governing bodies of Member Associations and collaborative and other partners.
8. This policy does not cover:
    a. Bullying or harassment, including sexual harassment, in the workplace as this is addressed through IPPF's Respect at Work Policy and associated procedures;

[1] Staff refers to all paid staff: permanent, fixed term and temporary staff; it includes employees, agency workers, consultants, interns and contractors.

[2] International Convention on the Elimination of All Forms of Racial Discrimination, International Covenant on Civil and Political Rights, International Covenant on Economic, Social and Cultural Rights, Convention on the Elimination of All Forms of Discrimination against Women, Convention against Torture and Other Cruel, inhuman or Degrading treatment or Punishment, Convention on the Rights of the Child, Convention on the Rights of Persons with Disabilities.

b. Safeguarding concerns in the wider community not caused by IPPF or anyone associated with IPPF.

9. Where a concern is about a volunteer who is over 18 and under 25, who has no additional vulnerabilities, the Senior Safeguarding Adviser will make a decision in consultation with the volunteer themselves, as to whether the concern would be best addressed with under Safeguarding Policies and procedures or the Respect at Work Policy and procedures.
10. IPPF will only engage with other organizations that come in contact with children and vulnerable adults if they agree with and meet the standards and principles of IPPF's Safeguarding Policy and procedures.

Definition

11. In this policy, safeguarding refers to IPPF's commitments to protect children and vulnerable adults from harm arising from coming into contact with IPPF.
12. This policy also applies to IPPF's beneficiaries[3] due to a recognition that beneficiaries can be exposed to abuse of authority and as such can be considered vulnerable. This does not imply any negative connotation on the beneficiaries themselves but rather ensures that IPPF is comprehensive in its safeguarding duties.
13. Further definitions relating to safeguarding are provided in the glossary below.

Guiding Principles

14. *Empowerment* – decisions will be survivor (victim) led, with the aim to seek informed consent[4] when the survivor is an adult, and obtaining and respecting survivor's views when they are a child or an adult unable to give informed consent. IPPF will endeavour to ensure its communication is in an appropriate language and format.
15. *Prevention* – It is better to take action before harm occurs. IPPF recognises the key role that prevention has in safeguarding and will ensure it develops and provides safe services which keep people safe from abuse and exploitation. This includes applying a safeguarding lens to promotional communications and fundraising activities and providing training and support in recognising abuse.
16. *Protection* – Abusive behaviour in any environment is never accepted. IPPF Secretariat, Member Associations, collaborative partners and other partners will provide services in a manner that does not diminish their safeguarding responsibilities. IPPF will have clear channels to enable reporting in a confidential and anonymous (if required) basis. IPPF will respond appropriately to safeguarding concerns and provide support and representation to survivors (victims).
17. *Partnership* – IPPF delivers its services through locally-owned Member Associations and collaborative partners and recognises that local communities have a part to play in preventing, detecting and reporting neglect and abuse. In the spirit of ensuring safeguarding competency throughout all of IPPF, IPPF will monitor that Member Associations, collaborative partners and other partners adhere to safeguarding standards and may need to intervene where these fall below an acceptable standard.

[3] An IPPF beneficiary is someone who receives a service from IPPF or takes part in IPPF activities

[4] IPPF understands that the rights and protections guaranteed to people under the age of 18, as a matter of international and national law, sometimes differ from the rights of adults. These differences relate to all aspects of human rights but require particular approaches in regard to sexual rights. IPPF begins from the premise that persons under the age of 18 are rights holders, and that at different points within the spectrum of infancy, childhood, and adolescence, certain rights and protections will have greater or lesser relevance

18. *Proportionality* – IPPF recognises that life is not risk free. IPPF will support activities across its Member Associations, collaborative partners and other partners that identify risks, and mitigate against them, but are not unduly risk averse. IPPF will ensure its responses are proportionate to the circumstances of any incident and the wishes of the survivor (victim), and constitute the least intrusive response appropriate.
19. *Accountability* – IPPF will act with integrity, follow due process and be transparent and accountable. IPPF will include anonymous safeguarding data in its annual reporting. IPPF acknowledges that, whilst everyone has responsibility for safeguarding, the Board of Trustees and Director-General are ultimately accountable for ensuring a safeguarding culture exists at IPPF.

Implementation

20. It shall be the responsibility of the Board of Trustees, Director-General, , Regional Directors, Member Associations' boards and Executive Directors to ensure that policies that meet the abovementioned minimum standards are in place, and are implemented, monitored and reviewed accordingly. The Secretariat shall develop and keep updated the Safeguarding Manual which contains detailed guidance including the Safeguarding Incident Reporting Procedure.
21. IPPF Secretariat, including Safeguarding, Gender and Youth teams shall be available to advise and support this work.
22. IPPF Member Associations, collaborative partners and Secretariat will:
    i. Be aware of their responsibilities for safeguarding children, vulnerable adults and beneficiaries.
    ii. Be up to date on local child protection and safeguarding vulnerable adults legislation and responsibilities.
    iii. Adopt and implement safeguarding policies and procedures based on the above principles and the implementation points below, whilst reflecting local legislation and requirements.
    iv. Ensure adherence with the IPPF Safeguarding Incident Reporting Procedure.
    v. Ensure all breaches of the Safeguarding Policy are dealt with appropriately and recorded and stored securely with restricted access.
    vi. Make available evidence of all of the above to the IPPF Director General at request.

Prevention

23. IPPF Member Associations, collaborative partners and Secretariat will:
    a. Ensure all staff have access to, are familiar with, and know their responsibilities within this Policy.
    b. Ensure all staff have read, understood and adhere to the Code of Conduct and further safeguarding guidance within the Safeguarding Manual.
    c. Design and undertake all its programs and activities in a way that protects children, vulnerable adults and beneficiaries, from any risk of harm that may arise from their coming into contact with IPPF. This includes the way in which information about individuals in programmes is gathered and communicated, and using risk assessments.
    d. Implement stringent safeguarding procedures when recruiting, managing and deploying staff and associated personnel.[5]
    e. Ensure staff receive training on safeguarding at a level commensurate with their role in the organization but that at a minimum to ensure that all

[5] See Annex 1 and Safeguarding Manual.

volunteers, trustees and staff are aware that abuse is not tolerated, and that all concerns will be recorded and heard.

f. IPPF managers are accountable for ensuring that the safeguarding policy and procedures are fully embedded within their areas of responsibility.
g. Contribute to creating and maintaining an environment that prevents safeguarding violations and promotes the implementation of this Policy.
h. Report any concerns or suspicions regarding safeguarding violations by an IPPF staff member or associated personnel to IPPFs Global Incident Reporting Unit.

Reporting

24. IPPF Member Associations, collaborative partners and the Secretariat will:
    a. Ensure that safe, appropriate, accessible means of reporting safeguarding concerns are made available and promoted to staff and the communities we work with. This is through IPPF SafeReport, the external incident reporting service.
    b. Ensure all supervisors and senior staff are aware of how to complete an incident reporting form when concerns are raised outside of IPPF SafeReport, which must be passed to the relevant incident reporting unit to log.
    c. Ensure all are aware of additional measures required where a concern is about a child or vulnerable adult.
    d. Provide protection to any volunteer, trustee and staff reporting concerns or complaints in line with whistleblowing principles contained in the Raising a Concern Policy.
    e. Ensure IPPF's Global Incident Reporting Unit are informed as soon as possible to enable Charity Commission and donors to be alerted as per requirements.

Response

25. IPPF Member Associations, collaborative partners and Secretariat will:
    a. Follow up on safeguarding reports and concerns promptly and according to IPPF's Safeguarding (Children & Vulnerable Adults) Policy and procedures, and local legal and statutory obligations.
    b. Apply appropriate disciplinary measures to staff found in breach of either the Safeguarding (Children & Vulnerable Adults) Policy or the Code of Conduct.
    c. Ensure that responses are survivor focused, keeping the needs of the survivor at the forefront of any investigation process.
    d. Offer support to survivors (victims) of harm caused by staff or anyone associated with IPPF, regardless of whether a formal investigation is carried out. An up to date list of local organisations and contacts offering support must be available. This list should include but is not limited to information about legal, counselling, medical and psychosocial support. Decisions regarding support will be led by the survivor (victim).
    e. Ensure that appropriate confidentiality is maintained at all stages of the process when dealing with safeguarding concerns. Information relating to the incident and subsequent case management should be shared on a need to know basis only, and should be kept secure at all times, in line with IPPF's Confidentiality and Information Sharing Policy. Confidentiality should prioritise the survivor rather than the alleged perpetrator and should not be used as an excuse for not responding to a concern.
    f. Ensure quarterly safeguarding updates are given to the Global Incident Reporting Unit and boards where applicable.

g. Ensure regular review and learning from safeguarding incidents.

26. Additionally, Member Associations and collaborative partners that provide sexual and reproductive health services to children, young people and vulnerable adults should have a policy in place to ensure that service delivery points are safe environments that, at a minimum, have guidance for health professionals on their legal, professional and ethical obligations to report suspected abuse or exploitation of a vulnerable client, to respect their right to privacy and to obtain their informed consent.
27. This policy replaces IPPF Policy 4.17 Protecting Children, Young People and Vulnerable Adults.
28. This policy shall be reviewed every year

Associated policies

Code of Conduct
Raising a Concern Policy
Respect at Work Policy
Confidentiality and Information Sharing Policy

Glossary (local glossaries should contain definitions of abuse as per local legislation)

Safeguarding

For IPPF Safeguarding in general means protecting peoples' health, wellbeing and human rights, and enabling them to live free from harm, abuse and neglect. It means taking all reasonable steps to prevent harm, particularly sexual exploitation, abuse and harassment from occurring; to protect people in contact with IPPF, especially vulnerable adults and children, from that harm; and to respond appropriately when harm does occur.
This definition draws from IPPF values and principles and shapes IPPF culture. It pays specific attention to preventing and responding to harm from any potential, actual or attempted abuse of power, trust, or vulnerability, especially for sexual purposes.

Safeguarding Children & Vulnerable Adults (SCVA)

For IPPF SCVA specifically applies to the prevention of all forms of abuse and exploitation of children and vulnerable adults. It includes the prevention of sexual exploitation and abuse (PSEA). Safeguarding puts beneficiaries and affected persons at the centre of all we do.
Safeguarding applies consistently and without exception across IPPF programmes, partners and staff. It requires proactively identifying, preventing and guarding against all risks of harm, exploitation and abuse and having mature, accountable and transparent systems for response, reporting and learning when risks materialise. Those systems must be survivor-centred and also give appropriate protection to those accused until any guilt is established.

Vulnerable Adult (At risk adult)

Sometimes also referred to as at risk adult, is generally someone who may be unable to take care of themself or protect themself from harm or exploitation. They may be more at risk of abuse and exploitation due to factors such as, for example, gender, mental health issues, learning or physical disabilities, age, sexual orientation, or as a result of the impact of natural disasters and conflicts.

For the purpose of IPPF's policies and procedures for vulnerable adults, IPPF includes IPPF beneficiaries[6] as vulnerable adults. This is due to a recognition that misuse of power can also apply to IPPF beneficiaries. This does not imply any negative connotation on IPPF beneficiaries but rather ensures that IPPF is comprehensive in its safeguarding duties.

Child
The United Nations Convention on the Rights of the Child (CRC) affords special rights and protections to all those under the age of 18. For the purposes of this policy, the term 'children' is used to refer to those under the age of 18.

Young Person
For the purposes of its own programmatic work and data collection, IPPF, in line with the UN, defines young people as everyone aged 10 to 24.

Confidentiality
Confidentiality is protecting information from unauthorised disclosure. Confidential means information which is not common knowledge and is of value. This includes personally identifiable information as well as sensitive documents. Confidential information should only be shared on a need to know basis, i.e. it is shared only where there is a justification that the person needs to know in order to perform their role.

Child abuse and neglect
Sometimes also referred to as child maltreatment, is defined as all forms of physical and emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation resulting in actual or potential harm to the child's health, survival, development or dignity in the context of a relationship of responsibility, trust, or power. Within the broad definition of child maltreatment, five subtypes are distinguished – these are physical abuse; sexual abuse; neglect and negligent treatment; emotional abuse and exploitation. (WHO 1999/2002)

Harm Psychological, physical and any other infringement of an individual's rights.

Psychological harm Emotional or psychological abuse, including, but not limited to, humiliating and degrading treatment such as bad name calling, constant criticism, belittling, persistent shaming, solitary confinement and isolation.

Protection from Sexual Exploitation and Abuse (PSEA)
Refers to the prevention of sexual exploitation and abuse of affected populations by staff or associated personnel. The term derives from the United Nations Secretary General's Bulletin on Special Measures for Protection from Sexual Exploitation and Abuse (ST/SGB/2003/13).

Sexual abuse
Actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions.

Sexual exploitation
Actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another. This definition incudes human trafficking and modern slavery.

Survivor
The person who has been abused or exploited. The term survivor is often used in preference to victim as it implies strength, resilience and the capacity to survive, however it is the individual's choice how they wish to identify themselves.

[6] An IPPF beneficiary is someone who receives a service from IPPF or takes part in IPPF activities

Annex 1 Safe Recruitment Checklist

IPPF is committed to following agreed best practice in safe recruitment as part of its commitment to its safeguarding duties. IPPF Member Associations, collaborative partners and partner organisations are also required to follow this checklist as a minimum.

Job Adverts
Should, as a minimum, include:
"IPPF is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults and expects all employees, volunteers, contractors and partners to share this commitment'

Job description
Should, as a minimum, include:

- **Statement:** As above
- **Role**: Adhere to the safeguarding reporting and monitoring requirements of this role.
- **Person specification**: Demonstrate an understanding of and commitment to safeguarding in local and international context.
- **Person specification:** Demonstrate a willingness to sign and adhere to IPPF's Code of Conduct and Safeguarding Policy.

Self-Disclosure
Applicants are required to sign a self-disclosure form which acknowledges that IPPF will disclose any misconduct in references.

Investigate Gaps in Employment History
Gaps in career history must always be followed up, with the candidate or with a referee, and, if felt needed, a request for supporting evidence should be made.

Carry Out a Criminal Records Check
IPPF acknowledges its responsibility not to knowingly allow a barred person to work with vulnerable groups (including children). IPPF will inform appropriate local regulators if an individual is removed from post because they have harmed, or because they pose a risk of harm to vulnerable groups (including children).

Verification of qualifications and experience and suitability

- A minimum of 2 written references is required that explicitly cover questions around suitability to work with children or vulnerable adults.
- Talking to referees
- Robust interviews that also cover safeguarding, equality, and diversity

Contract detail
Employment contracts should include reference to the IPPF Code of Conduct Individual contractor's contract should include: "By signing the below, I, the Individual Contractor, acknowledge and agree that I have read and accept the terms of this Contract and that I have read and understood and agree to abide by the IPPF code of conduct."

Mandatory safeguarding induction and yearly safeguarding training

Giving references

IPPF will disclose in written references when someone has been dismissed for serious misconduct or left before an investigation was completed. References should only be sent from Human Resources and state that they are from Human Resources so that it is clear they have been checked and verified.

Human Resource files containing safeguarding concerns and investigations
These files should be retained past the data protection guidelines to ensure that should an individual request a reference at a later date IPPF still have the information to do so.

As adopted by Governing Council, May 2005

Last amended by Governing Council, May 2020

1.18 RESPECT AT WORK

Introduction

1. IPPF is dedicated to its values, code of conduct and employment principles in promoting a positive workplace culture and environment which is free from all forms of unacceptable behaviour, including but not limited to bullying and harassment, as well as sexual harassment.
2. IPPF recognises that the right to be free from abuse, exploitation and harassment is enshrined in international human rights law namely ICERD, ICCPR, ICESCR, CEDAW, CAT, CRC, CRPD.[40] IPPF additionally acknowledges that sexual harassment is a form of gender-based violence.
3. IPPF is committed to operating with integrity and utilizing the talents of everyone.
4. IPPF believes everyone has the right to work in a professional and supportive environment which encourages harmonious relationships where fairness, dignity and mutual respect are at the heart of all its work.
5. IPPF expects the highest standards of behaviour always and is committed to taking appropriate steps to prevent unacceptable behaviour at work. IPPF will not tolerate any form of bullying and harassment by volunteers, trustees or staff. Any breach of this policy will be treated as a disciplinary matter.
6. This Respect at Work policy is intended to set out the guiding principles and values applicable to all elements of IPPF (its Secretariat, Member Associations, members of the Nominations and Governance Committee, Board of Trustees, Finance, Audit & Risk Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee, and governing bodies of Member Associations). These guiding principles and values need to be implemented through the relevant regional and local policies and procedures.

Purpose and scope

7. This policy aims to develop a positive working environment encouraging respectful behaviour across the Federation and preventing all forms of unacceptable behaviour.
8. The policy sets out IPPF's principles and standards in relation to unacceptable behaviour, which includes all forms of bullying and harassment.
9. This policy applies to all volunteers, trustees and staff[41] of IPPF including members of the Nominations and Governance Committee, Board of Trustees, Finance, Audit & Risk Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee. Collaborative partners and other partners working with IPPF are required to adhere to this Policy in addition to their own policies and procedures.

[40] International Convention on the Elimination of All Forms of Racial Discrimination, International Covenant on Civil & Political Rights, International Covenant on Economic, Social & Cultural Rights, Convention on the Elimination of All Forms of discrimination against Women, Convention against Torture and Other Cruel, inhuman or Degrading treatment or Punishment, Convention on the Rights of the Child, Convention on the Rights of Persons with Disabilities

[41] "Staff" refers to all paid staff: permanent, fixed term and temporary staff; it includes employees, agency workers, consultants, interns and contractors

Definitions

Abuse of authority refers to the improper use of a position of influence, power or authority by an individual against another colleague or group of colleagues. This is particularly serious when an individual mis-uses their influence, power or authority negatively to influence an individual's career or employment conditions, including, but not limited to, in connection with the appointment, assignment, contract renewal, performance evaluation or promotion, of another. It can include a one-off incident or a series of incidents. Abuse of authority may also include misuse of power that creates a hostile or offensive work environment which includes, but is not limited to, the use of intimidation, threats, blackmail or coercion.

Bullying is offensive, intimidating, malicious or insulting behaviour which amounts to or involves an abuse or misuse of power through means that undermine, humiliate, denigrate or injure the recipient.

Harassment is unwanted conduct related to age, sex, sexual orientation, gender, gender identity or expression, race, ethnic or national origin, religion or belief, partnership status, pregnancy or parental status, disability, health or any other analogous personal status which has the purpose or effect of violating an individual's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that individual.

Intimidation refers to the use of threat or force (express or implied), whether against the recipient of the conduct or another.

Sexual harassment is unwelcome conduct of a sexual nature the purpose of which is to make a person feel offended, humiliated or intimidated or to create a hostile, intimidating or humiliating environment for the recipient or another person or persons, or which is reasonably taken by a person or persons to have that effect. Sexual harassment will also occur where a person is asked to engage in sexual activity or other conduct of a sexual nature as a condition of employment or advancement at work, or to avoid any work-related detriment. Sexual harassment includes verbal and nonverbal conduct including and physical and sexual assault.

Unacceptable behaviour is unwelcome, uninvited and unreciprocated behaviour which has a negative effect on the individual subjected to such behaviour. This behaviour could cause distress or discomfort to the individual concerned. While such behaviour may take a variety of forms, it excludes legitimate action taken to support and encourage a staff member to achieve their objectives.

Principles

10. IPPF is committed to providing a supportive environment free from harassment, intimidation and bullying, where all are treated with dignity, respect and without discrimination.
11. IPPF believes that promoting respect at work is the responsibility of all individuals who work in IPPF. All volunteers, trustees and staff should treat each other with respect regardless of individual differences, job level, job role or relationship.
12. All volunteers, trustees and staff should feel empowered to challenge inappropriate and unacceptable behaviour and language. Moreover, they should understand how behaviour can affect others and, if necessary, change it.
13. IPPF will operate a zero-tolerance policy for any form of bullying, harassment and

abuse of authority in the workplace. It will treat all incidents seriously and in confidence. It will promptly investigate all allegations of such behaviour. Any person found to have bullied or harassed another or of having abused their authority will face disciplinary action, up to and including dismissal from employment or engagement.

14. Complaints concerning alleged or suspected breaches of this policy should be made through the relevant grievance procedure if the individual bringing the complaint has been personally affected by the conduct complained of, or otherwise through the IPPF's Raising a Concern policy.
15. IPPF is committed to ensuring that those who have a genuine belief they are experiencing bullying or harassment and raise this as a concern or grievance will not experience any detriment from doing so.

Implementation

16. It shall be the responsibility of the Board of Trustees, Director-General, Regional Directors, Member Associations' boards and Executive Directors to ensure that policies and procedures that meet the above mentioned minimum standards and implementation points below are in place and are implemented accordingly.
17. This policy should be read in conjunction with IPPF's Code of Conduct.
18. IPPF Member Associations and Secretariat shall:
    i. be aware of their responsibilities for ensuring Respect at Work and the adherence to the IPPF Code of Conduct;
    ii. adopt and implement Respect at Work policies based on the above principles, whilst reflecting any local legislation and requirements;
    iii. ensure that appropriate grievance procedures are in place to manage individual concerns raised under this policy by staff and volunteers;
    iv. ensure their volunteers, trustees, staff and beneficiaries and local communities are aware of the IPPF Code of Conduct and Respect at Work Policy;
    v. ensure that responses are complainant-focused keeping the needs of the person who has made an allegation of unacceptable conduct falling within this policy at the forefront of any investigation process;
    vi. offer support to individuals complaining of a breach of this policy;
    vii. make available evidence of all of the above to the IPPF Director General at request.

Procedures for dealing with alleged breaches of this policy

19. IPPF volunteers, trustees and staff can raise concerns about bullying and harassment they are experiencing themselves, from other volunteers, trustees and staff, through their supervisor or Human Resources in accordance with the relevant grievance procedure. If they feel unable for any reason to do this, they can use IPPF SafeReport.
20. When bullying and harassment of volunteers, trustees or staff is witnessed this should be raised as a concern through IPPF SafeReport or otherwise in accordance with the Raising a Concern policy.
21. Where bullying and harassment concerns are raised by others as an organizational or systemic concern, consideration will be given as to whether they should additionally be addressed in line with safeguarding policies and procedures. This decision should be taken in consultation with safeguarding staff.
22. Allegations of bullying and harassment, including sexual harassment, by a member

of the Nominations and Governance Committee, Board of Trustees, Finance, Audit & Risk Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee, Legal Counsel or the IPPF Director General shall be dealt with by the Independent Complaint Panel.[42]

As adopted by Governing Council, November 2018

Last amended by Governing Council, May 2020

[42] See Raising a Concern – Policy 1.19

1.19 RAISING A CONCERN

1 Introduction

1.1 IPPF expects that those working for and representing the organization will act with honesty and integrity including by not discriminating on the basis of age, sex, sexual orientation, gender, gender identity or expression, race, ethnic or national origin, religion or belief, partnership status, pregnancy or parental status, disability, health or any other analogous personal status.[1]

1.2 IPPF recognises that the right to be free from abuse, exploitation and harassment is enshrined in international human rights legislation, namely ICERD, ICCPR, ICESCR, CEDAW, CAT, CRC, CRPD.[2] IPPF additionally acknowledges that sexual harassment and abuse are a form of gender-based violence.

1.3 IPPF is committed to supporting good management practice and to creating an open culture where volunteers, trustees and staff feel able to speak up and express concerns and raise complaints about their colleagues' and managers' conduct informally with them in the first instance.

1.4 IPPF is committed to protecting its volunteers, trustees and staff from any detriment, victimization, harassment or bullying as a result of raising a concern. Reports of any such behaviour will be taken seriously and managed appropriately through the relevant disciplinary process.

1.5 IPPF is accountable to the communities where it works, its beneficiaries, donors and supporters, as well as to its volunteers, trustees and staff. An open, fair and central complaints and whistleblowing process supports IPPF in creating a culture of speaking up and is an integral part of IPPF's safeguarding approach. Therefore, IPPF Secretariat will maintain the oversight and coordination of all complaints, concerns and whistleblowing reports across the Federation.

1.6 Understanding, responding to and learning from complaints, concerns and whistleblowing reports is an essential part of IPPF's transparency and accountability processes. Feedback about IPPF complaints, concerns and whistleblowing reports allows IPPF to reflect on and identify how IPPF needs to change and to adapt. IPPF views this process as a positive opportunity to learn, develop and improve.

1.7 This policy does not form part of any contract of employment or other contract to provide services, and IPPF may amend it at any time.

2 Purpose and Scope

2.1 This policy applies to all complaints, concerns and whistleblowing reports. It makes clear the guiding principles that should be adhered to by all who are within the scope of this policy.

2.2 This policy makes clear how complaints, concerns, or whistleblowing reports should be raised (reported) and responded to and the guiding principles that apply to the response.

2.3 The guiding principles and values set out in this policy are applicable to all elements of IPPF (its Secretariat, Member Associations and collaborative partners including

[1] Equality, Diversity and Inclusion Policy.

[2] **ICERD**: International Convention on the Elimination of All Forms of Racial Discrimination, **ICCPR**: International Covenant on Civil and Political Rights, **ICESCR**: International Covenant on Economic, Social and Cultural Rights, **CEDAW;** Convention on the Elimination of All Forms of Discrimination against Women, **CAT:** Convention against Torture and Other Cruel, Inhuman or Degrading treatment or Punishment, **CRC:** Convention on the Rights of the Child, **CRPD:** Convention on the Rights of Persons with Disabilities.

members of the General Assembly, Nominations and Governance Committee, Board of Trustees, Finance, Audit & Risk Committee, Membership Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee, Legal Counsel and governing bodies of Member Associations and collaborative and other partners).

2.4 Collaborative and other Partners are required to adhere to this policy in addition to their own policies and procedures which shall be aligned with this policy.

3 Definitions

3.1 **Complaint or concern** means an expression of dissatisfaction or statement of concern that relates specifically to any element IPPF (as described above). It can relate, for example, to malpractice, misconduct, actions taken, lack of action or behaviour. It is not a complaint or concern about IPPF's work generally; a general question about IPPF's or the individual's work; a request for information; or a suggestion about how IPPF or the individual could operate or improve its or their work.

3.2 **Detriment** occurs when an employee is subjected to a disadvantage; e.g., losing a job, exclusion, demotion, denial of promotion, blocking access to training, resources etc or a refusal of service or reduction in the quality of service offered or provided.

3.3 **Grievance procedure** is the internal procedure that will be followed where a staff member has submitted a Report about employment and work place matters relating to them.

3.4 **Incident Coordinator** is a person assigned by IPPF's Global Incident Reporting Unit or a Regional Incident Reporting Unit, to manage a Report.

3.5 **IPPF SafeReport** is a confidential, multi-lingual reporting mechanism and case management system.

3.6 **Malpractice and/or misconduct** includes, but is not limited to, the issues listed below:

(a) Financial wrongdoing including theft, bribery, fraud, money laundering and aid diversion;

(b) Failure to comply with any legal obligations;

(c) Bullying and harassment including sexual harassment, or victimisation of a volunteer, trustee or staff member;

(d) Abuse or exploitation, including sexual, of children, vulnerable adults or beneficiaries;

(e) Breach of IPPF's Code of Conduct or Respect at Work Policy;

(f) Abuse of authority;

(g) Danger to the health and safety of individuals or damage to the environment;

(h) Other improper conduct or unethical behaviour;

(i) Activity which would bring the organisation into serious disrepute;

(j) Concealment of information relating to any of the matters listed above.

3.7 **Report** means a complaint, concern or whistleblowing report submitted to IPPF or any of its elements.

3.8 **Reporter** is a person who submits a Report.

3.9 **Unmeritorious** in relation to a Report means one that does not warrant further investigation or action because it:

(a) Is not within the scope of this policy;

(b) Concerns matter that have already been addressed under this policy or any other IPPF policy or procedure;

(c) Is trivial, obviously lacks substance or appears to have no serious purpose or value;

(d) Appears malicious or mainly intended to cause inconvenience, harassment or disproportionate expense to IPPF and or any individuals complained about; or

(e) Otherwise appears frivolous, repetitive, unreasonably burdensome or unwarranted.

3.10 **Victim/survivor** means anyone alleged to have been harmed by the actions of IPPF or those under its control.

3.11 **Whistleblower** means a worker who makes a whistleblowing report.

3.12 **Whistleblowing report** means any disclosure of information made by a worker which, in the reasonable belief of the worker making the disclosure, is made in the public interest and tends to show one or more of the following:

(a) That a criminal offence has been committed, is being committed or is likely to be committed;

(b) That a person has failed, is failing or is likely to fail to comply with any legal obligation to which they are subject;

(c) That a miscarriage of justice has occurred, is occurring or is likely to occur;

(d) That the health or safety of any individual has been, is being or is likely to be endangered;

(e) That the environment has been, is being or is likely to be damaged; or

(f) That information tending to show any matter falling within any one of the preceding paragraphs has been, is being or is likely to be deliberately concealed.

4 Anonymous Reports

4.1 IPPF would rather receive an anonymous Report than not have it reported at all. However, it may be difficult for IPPF to investigate Reports made anonymously, especially if they are not adequately substantiated.

4.2 Where IPPF is unable to investigate an anonymous Report, it will nevertheless be reviewed and logged.

4.3 Individuals concerned about being identified are encouraged to request confidentiality.

5 Unmeritorious Reports

5.1 IPPF may decide not to proceed with the investigation of a Report if it is deemed unmeritorious. In considering whether a Report is unmeritorious, IPPF recognises that:

(a) Individuals submitting a Report may be aggrieved and frustrated so the focus must be on careful consideration of the merits of the case and not the attitude of the individual.

(b) Every Report must be considered on its own merits. Even if someone has submitted a frivolous or vexatious Report in the past, it must not be assumed that any Report they submit will also be frivolous or vexatious.

5.2 A decision not to proceed with the investigation of a Report will be taken in accordance with IPPF's established internal procedures in force at the relevant time.

5.3 Vexatious and/or persistent or repetitive frivolous Reports submitted by volunteers, trustees and workers may result in disciplinary action. It is important to stress that disciplinary action will not be taken in respect of individuals who are merely mistaken or incorrect, and that disciplinary action will only be taken when the nature of the Reports is such that they can fairly be categorized as malicious and/or harassing and/or brought in bad faith.

5.4 Reports which if submitted by workers could result in disciplinary action may, if brought by persons external to IPPF, result in legal action.

6 Guiding Principles

Accessibility

6.1 IPPF is committed to making the process of submitting a Report as easy as possible. IPPF's incident reporting service, IPPF SafeReport, is available in a number of different formats and languages. Support is available on request, in strictest confidence through the service, to individuals with additional needs. All Reports should be reported to IPPF SafeReport: https://ippf.safereport.eu/web

Accountability and transparency

6.2 Reports submitted to IPPF SafeReport will be acknowledged.

6.3 IPPF's Global Incident Reporting Unit will log and monitor all Reports that are received and will collate statistics for IPPF's annual reporting. IPPF will ensure that regular reviews are undertaken of the types and number of Reports and will report on those and their implications to the Board of Trustees and, as appropriate, externally.

6.4 IPPF aims to ensure that all feedback and lessons learnt from Reports contribute to service improvement and staff welfare.

6.5 IPPF will ensure it fulfils its internal escalation and external reporting responsibility in relation to sharing information about Reportable or Serious Incidents (RoSI). It has in place a RoSI policy, process and procedure to ensure timely internal escalation and external reporting where required.

Confidentiality

6.6 All Reports are processed, managed and stored in accordance with IPPF's policies on confidentiality and data privacy.

6.7 Information about a Report will be provided *only* to those people who need to know about it, in order for the Report to be actioned properly. Personal details about the reporter and any alleged perpetrators will remain confidential within the need-to-know group.

6.8 Where confidentiality is requested, every effort will be made to maintain this and identities will not be disclosed without prior consent, unless required by law.

6.9 Reporters should be aware that information provided to IPPF may not remain confidential from IPPF's regulators or from major funders who have a contractual right

to receive certain information. Reports that contain information that IPPF considers should be reported to any regulator, the police or any other statutory authority will not be kept confidential from such regulator, the police or other statutory authority.

6.10 IPPF recognises that non-disclosure agreements do not prevent individuals from making disclosures in the public interest.

6.11 The Secretariat will undertake periodic checks to ensure compliance with IPPF's policies on collecting and using data in connection with handling Reports.

6.12 The direct report of concerns by a whistleblower to the media or otherwise to organizations outside the IPPF (including all its elements, as described above) may, depending on the appropriateness of the recipient of the information, negate the whistleblower's rights under this policy and/or under local law.

Efficiency and timeliness

6.13 IPPF will acknowledge and aim to resolve Reports in a timely manner.

Fairness

6.14 IPPF will listen to the reporter and take the time to understand what the Report is about, the reasons for it and the outcome the person expects.

6.15 Reports will be dealt with consistently and the persons investigating and making decisions will be impartial.

6.16 No volunteer, trustee or staff member will be subject to any detriment, victimization, harassment or bullying as a result of submitting a Report. This shall not, however, prevent disciplinary action being taken as described in paragraph 5.3 of this policy.

6.17 If the reporter is receiving a service from IPPF, submitting a Report will not affect the service they receive.

Protection for reporters and alleged victims/survivors

6.18 IPPF endeavours to ensure all processes relating to Reports are victim / survivor focused. This means that, while due process is followed, the needs of any victim / survivor remain at the forefront of any investigation process.

7 How to Submit a Report

7.1 Reports should be submitted through IPPF SafeReport, IPPF's reporting mechanism, accessible on IPPF's website: IPPF SafeReport.

7.2 Any Report submitted through other channels, will be submitted to IPPF SafeReport.

7.3 Staff and volunteers can also choose to discuss their concern or complaint with an appropriate manager, director, Safeguarding and Incident Management Advisor, union representative or member of a Human Resources team, following which it may be submitted to IPPF SafeReport if the reporter wishes the matter to be responded to.

8 Responding to Reports

8.1 When a Report is submitted through IPPF SafeReport, it will be triaged at the Global Incident Reporting Unit and assigned to the appropriate secretariat region, considering any known conflicts of interest.

8.2 Once received by the regional secretariat regional office, it will be triaged by the Regional Incident Reporting Unit and assigned to the relevant secretariat Incident Coordinator, considering any known conflicts of interest.

8.3 The response for each Report will depend on the nature of the Report, the people involved, and the entity the Report relates to. For example, if a member of Secretariat staff submits a Report about a Secretariat colleague, the grievance policy will be followed. If a client of an IPPF service run by a Member Association submits a Report about that Member Association's service to them, then the appropriate Member Association policy will be followed.

Reports about matters relating to the Secretariat

8.4 If the Report relates to the IPPF Secretariat, the Incident Coordinator will, on a need-to-know basis, discuss with appropriate colleagues in confidence the appropriate response to be taken and which policy should be applied.

Reports about Member Associations, Collaborative or other Partners or Organisations

8.5 If the Report relates to an entity other than the IPPF Secretariat, e.g., an IPPF Member Association, collaborative or other partner, the Incident Coordinator will discuss the report with appropriate colleague/s on a need-to-know basis - usually their manager - and make a decision about whether the report is in or out of scope, maintaining appropriate confidentiality.

8.6 If the case is assessed as out of scope – the reporter will be informed of this decision and advised to raise their concerns through the processes in place in that organisation. No information should be shared with the MA without the reporter's consent.

8.7 Reports relating to financial wrongdoing, safeguarding or safety and security should not be automatically be assessed as out of scope without the input of a subject matter expert.

8.8 If the report is considered to be in scope, the Incident Coordinator will alert the appropriate individual/s in that organisation and share the information received so that it can be responded to by that entity, considering any confidentiality or known conflict of interest matters.

8.9 The Member Association, collaborative or other partner will carry out their own investigation or other proportionate response once the case has been shared with them and provide regular updates to the IPPF Incident Coordinator. The Member Association, collaborative or other partner will share with the Incident Coordinator the final findings, outcome/s, conclusion and lessons learned from the investigation.

8.10 If a decision is made that IPPF needs to investigate a Report about a Member Association, collaborative or other partner, that organization is required to cooperate with the investigation and adhere to the IPPF Confidentiality and Information Sharing Policy.

8.11 Substantiated malpractice or failure of a Member Association to follow due process or ensure the implementation of the outcomes and recommendations of an investigation shall engage Section 9 of IPPF Act and Regulations on Suspension and Expulsion of Member Associations.

8.12 Substantiated malpractice or failure of any partner to ensure the implementation of the outcomes and recommendations of an investigation may amount to a breach of IPPF's contractual agreement with this partner. This may incur sanctions and termination of contract.

Reports involving the officers at the highest-level of the Federation

8.13 Reports submitted in respect of members of the IPPF Nominations and Governance Committee; the Board of Trustees, including the Chair of the Board of Trustees; the Legal Counsel; members of the Finance, Audit and Risk Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee; members of any other committee established by the Board of Trustees or the General Assembly; and the Director General, are dealt with in line with IPPF's Independent Complaints Committee policy.

9 Implementation

9.1 It shall be the responsibility of the Board of Trustees, Director General, Regional and Divisional Directors, Member Associations' boards and Executive Directors to ensure that this Raising a Concern policy is adhered to.

9.2 Where a Member Association, collaborative or other partner implements or has in place a policy that aligns with this Raising a Concern Policy, but may be titled differently, it should meet the above-mentioned guiding principles, be monitored and reviewed within a timeframe agreed by management.

9.3 IPPF Member Associations, collaborative or other partners and Secretariat will:

(a) Ensure their volunteers, trustees, staff and beneficiaries and local communities are aware of this policy and know how to submit Reports to IPPF SafeReport.

(b) Adopt and implement complaints, grievance and disciplinary policies and procedures based on the above guiding principles whilst reflecting local legislation and requirements.

(c) Ensure all leaders and managers lead by example and promote an environment where raising concerns is encouraged and welcomed.

(d) Ensure all Reports are appropriately logged and recorded.

(e) Make available evidence of all of the above to the secretariat upon request.

10 Other Complaint Mechanisms

10.1 Anyone wishing to complain about IPPF may complain to relevant regulators such as the Charity Commission for England and Wales, the Information Commissioner and the Fundraising Regulator. However, IPPF hopes that anyone wishing to complain will first raise the matter with IPPF in accordance with this policy. Depending on the nature and seriousness of the matters raised, IPPF may in any case make its own report to relevant regulators.

As adopted by IPPF Governing Council, November 2018

Amended by IPPF Board of Trustees, June 2026

Policy 1.20

1.20 CONFIDENTIALITY AND INFORMATION SHARING

Introduction

1. IPPF places a high value and importance on confidentiality and respects the confidentiality of its volunteers, trustees, staff, beneficiaries, complainants and partner organizations.
2. IPPF recognises it needs to ensure that across the Federation it protects and safely handles personal identifiable and confidential business information that it gathers, creates, processes and discloses.
3. IPPF also understands the importance of sharing information where required or appropriate in order to perform its safeguarding duties.
4. This policy is intended to set out the guiding principles and values applicable to all elements of IPPF (its Secretariat, Member Associations, members of the General Assembly, Nominations and Governance Committee, Board of Trustees, Finance, Audit & Risk Committee, Membership Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee, and governing bodies of Member Associations). These guiding principles and values need to be implemented through the relevant regional and local policies and procedures.

Purpose and scope

5. The purpose of this policy is to provide guidance to IPPF Secretariat and Member Associations with regard to the protection of confidential information and responsibilities regarding the sharing of such information.
6. This policy applies to all volunteers, trustees and staff[48] of IPPF and its Member Associations, collaborative partners and other partners including members of the General Assembly, Nominations and Governance Committee, Board of Trustees, Finance, Audit & Risk Committee, Membership Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee. All partner organizations working with IPPF are required to adhere to this Policy in addition to their own policies and procedures.

Definitions

7. References to obligations to confidentiality are references to the need to protect confidential information from unauthorized disclosure. Confidential information may consist of:
   i. Personal information of a private or sensitive nature;
   ii. Information that is not already lawfully in the public domain or readily available from another public source;
   iii. Information that has been shared in circumstances where the person giving

[48] Staff" refers to all paid staff: permanent, fixed term and temporary staff; it includes employees, agency workers, consultants, interns and contractors.

the information could reasonably expect that it would not be shared with others.

For IPPF, confidential information includes:

i. Internal business information and all proprietary information not generally known outside of IPPF, and
ii. Personal information relating to volunteers, trustees, staff, beneficiaries and complainants. Such information would include information relating to complaints or grievances etc.

8. Obligations of confidentiality may, exceptionally, be overridden by the public interest in disclosure. This will be the case only where a strong public interest justifies the disclosure of information which an individual would otherwise be entitled to protect. Disclosure will not be in the "public interest" merely because the public, or sections of it, will be interested in the material. Any decision to override obligations of confidentiality in the public interest are complex and must take account of both the potential harm that disclosure may cause and the general public interest of society in the preservation of confidentiality.

Principles

9. IPPF acknowledges confidentiality is an important principle in promoting trust, a culture of speaking up and ensuring that people feel safe to raise concerns and to report incidents.
10. IPPF recognises that confidentiality is not absolute and that sharing relevant information, when appropriate, is vital to good safeguarding practice. IPPF is committed to being open and honest from the outset about why, what, how and with whom information will, or could, be shared.
11. IPPF will seek consent to share information unless it is unsafe or inappropriate to do so. IPPF may still share information without consent where there is a legal duty to make a disclosure, where disclosure is regarded as being necessary to prevent serious harm, or where disclosure is regarded as being necessary in the public interest. These matters will be judged on the facts of each situation. Where possible, the person concerned will be informed a disclosure has been made.
12. IPPF will ensure that any personal information that is shared is:
    i. Necessary for the purpose,
    ii. Shared only with those people who need to have it,
    iii. Accurate and up to date,
    iv. Shared in a timely fashion, and
    v. Shared securely and in a way that does not put any individual to whom it relates at risk.
13. IPPF is committed to take appropriate security measures to prevent unauthorized people from gaining access to its information technology systems and other information.
14. Maintenance of confidentiality is a contractual obligation stipulated in IPPF's contracts and the Code of Conduct. Breach of confidentiality, whether directly or indirectly, is a disciplinary offence, which could result in dismissal and/or legal action including criminal prosecution. The duty to preserve the confidentiality of IPPF information extends beyond and continues after the individual's termination

of employment or engagement with IPPF.

15. Whistleblowing is not considered a breach of confidentiality. IPPF's approach to whistleblowing includes protection of employees who raise concerns or complaints about IPPF's practices.[49] Employees who whistle blow are ensured that their personal information will be kept confidential and that they will be protected from retaliation.

Implementation

16. It shall be the responsibility of the Board of Trustees, Director-General, Regional Directors, Member Associations' boards and Executive Directors to ensure that policies that meet the above-mentioned minimum standards are in place, and are implemented, monitored and reviewed accordingly.
17. IPPF Member Associations and Secretariat will:
    i. Be aware of their responsibilities for ensuring confidentiality;
    ii. Adopt and implement confidentiality policies and procedures based on the above principles and the information sharing implementation points below, whilst reflecting local legislation and requirements;
    iii. Ensure confidentiality sections are contained within all Human Resources policies and specifically in relation to grievances, performance management, disciplinary and internal complaints procedures;
    iv. Ensure their volunteers, trustees, staff and beneficiaries and local communities are aware of this policy and know how to use IPPF's incident reporting service, IPPF SafeReport;
    v. Ensure all breaches of confidentiality are recorded, stored securely with restricted access, reviewed and measures put in place to prevent such breaches in the future;
    vi. Make available evidence of all of the above to the IPPF Director General at request.

Information Sharing Requirements

18. There are situations where IPPF Secretariat, Member Associations and collaborative partners may have a legal duty to disclose information outside of IPPF, including:
    i. Where it is critical to prevent serious harm or distress or in life-threatening situations;
    ii. In order to report all child abuse to the relevant statutory services;
    iii. In order to report abuse of vulnerable adults and adult beneficiaries externally in line with IPPF's Safeguarding Incident Report procedure;
    iv. In order to report drug trafficking, money laundering and acts of terrorism to the police;
    v. Where it is requested in a court order.
19. If individuals have concerns about disclosing information, they may discuss this with their line manager and/or a safeguarding adviser.

Information Sharing with Donors and Regulators

20. IPPF may have the contractual obligation to share certain information with donors and regulators. Other than in cases falling within paragraph 17, however,

[49] See Raising a Concern Policy

confidential personal information should not be disclosed to donors.

Information Sharing and Investigations

21. In general, personal information and detail of investigations shall remain confidential to respect the privacy of the individuals concerned and to promote an open culture of being able to speak up and raise concerns.
22. IPPF recognises that there may be situations where the sharing of some limited information would be appropriate, in the public interest and in line with the growing development of international safeguarding good practice to minimize the ability of predators to move between organizations.
23. Situations where this may occur include but are not limited to:
    i. Where an investigation concludes that an individual committed serious misconduct involving sexual harassment in the workplace or any form of abuse or exploitation of children or vulnerable adults;
    ii. Where an individual leaves before an investigation is concluded.
24. IPPF will disclose any findings of sexual harassment, abuse of children and vulnerable adults in references and will report them to relevant regulatory authorities as required. IPPF will also disclose in references if an individual leaves before the conclusion of an investigation into sexual harassment or the abuse of children or vulnerable adults.
25. The question of whether there is a sufficient public interest to justify disclosure by IPPF will be judged on the facts of each situation. The key factors in deciding are necessity and proportionality, i.e. whether the proposed sharing is likely to make an effective contribution to preventing the relevant risk and whether the public interest in sharing information overrides the interest in maintaining confidentiality. In making the decision, IPPF will weigh up what might happen if the information is shared against what might happen if it is not. This decision will be taken by the most senior director in the organization with the advice of legal counsel.
26. IPPF recognises that non-disclosure agreements do not prevent individuals making disclosures in the public interest and will ensure that any non-disclosure agreements which it is a party to will make this clear.

Confidentiality and Information Sharing in Health Service Provision

27. Member Associations and collaborative partners providing health services need, in addition, to adhere to local confidentiality legislation in relation to confidential health records and their information sharing requirements.

Annex 1

Specific actions to be taken to ensure confidentiality

- All confidential documents should be marked "confidential" before being shared with the audience they were prepared for.
- All recipients of confidential documents shall be reminded of their duty to keep these confidential. A small heading on confidential documents which makes this clear can help.
- All confidential emails within the Federation should be sent out with the heading "confidential" with express request for readers to keep their content confidential unless expressly authorized to do otherwise.
- All confidential data containing personal information shall be password protected.
- Access to rooms and offices where personal or other confidential information is stored must be controlled and doors effectively secured.
- Measures should be in place to prevent oversight of personal or other information by unauthorized parties when sharing office space with others.
- At the end of each day, all desktops should be clear of any records containing personal or other confidential information.
- All records containing personal or other confidential information must be kept in locked storage.
- Unwanted printouts containing personal or other confidential information must shredded.
- Care must be taken in transferring information to ensure that the method used is secure. In most instances an Information Sharing Agreement will have been completed before any information is transferred, which will set out conditions for use and identify the mode of transfer.

As adopted by Governing Council, November 2018

Last amended by Governing Council, May 2020

Policy 1.21

1.21 EQUALITY, DIVERSITY AND INCLUSION

Introduction

1. Equality, diversity and inclusion are integral to IPPF as a global sexual reproductive health rights (SRHR) based organization where the core principles are founded on non-discrimination, fairness and opportunity.
2. IPPF recognises that the right to be free from discrimination and unequal treatment are enshrined in international human rights law namely ICERD, ICCPR, ICESCR, CEDAW, CAT, CRC, CRPD.[50]
3. IPPF also recognizes it is required to make reasonable adjustments to seek to ensure that people with all forms of disabilities are not at a disadvantage in the workplace or in accessing services.
4. IPPF is fully committed to the elimination of unlawful and unfair discrimination and believes in the importance and value of a diverse workplace.
5. IPPF's values of diversity and social inclusion apply to all aspects of IPPF's programmatic work.
6. IPPF will not discriminate because of age, sex, sexual orientation, gender, gender identity or expression, race, ethnic or national origin, religion or belief, partnership status, pregnancy or parental status, disability, health or any analogous personal status.
7. This policy is intended to set out the guiding principles and values applicable to all elements of IPPF (its Secretariat, Member Associations, members of the General Assembly, Nominations and Governance Committee, Board of Trustees, Finance, Audit & Risk Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee, and governing bodies of Member Associations). These guiding principles and values need to be implemented through the relevant regional and local policies and procedures.

Purpose and Scope

8. All involved with IPPF have a responsibility for taking action and ensuring that IPPF behaviours reflect a culture of respect. This policy should be read in conjunction with IPPF's Respect at Work Policy. This policy applies to all volunteers, trustees and staff[51] of IPPF and its Member Associations, collaborative partners and other partners including members of the General Assembly, Nominations and Governance Committee, Board of Trustees, Finance, Audit & Risk Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee. All partner organizations working with IPPF are required to

[50] International Convention on the Elimination of All Forms of Racial Discrimination, International Covenant on Civil and Political Rights, International Covenant on Economic, Social and Cultural Rights, Convention on the Elimination of All Forms of Discrimination against Women, Convention against Torture and Other Cruel, inhuman or Degrading treatment or Punishment, Convention on the Rights of the Child, Convention on the Rights of Persons with Disabilities.

[51] "Staff" refers to all paid staff: permanent, fixed term and temporary staff, it includes employees, agency workers, consultants, interns and contractors.

adhere to this Policy in addition to their own policies and procedures.

Definitions

9. IPPF considers that advancing **equality** involves breaking down barriers, eliminating discrimination, and ensuring equal opportunities and access for all both in employment and in the provision of IPPF's services and delivery of programmatic activities.
10. IPPF considers that **diversity** involves celebrating differences and valuing everyone. Each person is an individual with visible and non-visible differences and, by respecting this, everyone can feel valued for their contributions which benefits both the individual and IPPF.
11. IPPF considers that **inclusion** involves seeing difference as a benefit and sharing perspectives and differences, leading to better decisions. An inclusive environment is one where all feel valued, where individual contribution matters and where individuals can perform to their full potential, regardless of background, identity or circumstances.

Protected characteristics

12. For IPPF these include but are not limited to:
    i. age,
    ii. sex,
    iii. sexual orientation,
    iv. gender, gender identity or expression,
    v. race, ethnic or national origin,
    vi. religion or belief,
    vii. partnership status,
    viii. pregnancy or parental status,
    ix. disability,
    x. health.

Principles

13. IPPF acknowledges that equality and diversity are not inter-changeable but inter-dependent. There can be no equality of opportunity if difference is not valued and harnessed.
14. IPPF acknowledges its responsibility to make reasonable adjustments where possible to enable full inclusion and participation in the workplace and in securing access to IPPF services and activities.
15. IPPF acknowledges the need to create a culture where equality for all is prioritized, differences are embraced and respected and new and different ways of thinking and working are encouraged.
16. IPPF acknowledges the need to ensure that equality and diversity are considered in the provision of all its programmes of work and in the recruitment of staff, volunteers and trustees.
17. IPPF will ensure all are treated with respect and that appropriate action should be taken where issues arise. Breach of the Equality, Diversity and Inclusion Policy may result in disciplinary action which could result in dismissal.

18. IPPF will be transparent and accountable in this area by ensuring the auditing and monitoring of the implementation in all programmers of work and recruitment practice.

Implementation

19. It shall be the responsibility of the Board of Trustees, Director-General, Regional Directors, Member Associations' boards and Executive Directors to ensure that policies that meet the above-mentioned minimum standards are in place, and are implemented, monitored and reviewed accordingly.
20. IPPF Secretariat, including gender and diversity advisers shall be available to advise and support this work.
21. IPPF Member Associations, collaborative partners and Secretariat will:
    i. Be aware of their responsibilities for equality, diversity and inclusion ensuring there is a focus on leadership accountability.
    ii. Adopt and implement Equality, Diversity and Inclusion Policies and procedures based on the above principles and the implementation points below, whilst reflecting local legislation and requirements.
    iii. Ensure their volunteers, trustees, staff, beneficiaries and local communities are aware of this policy.
    iv. Provide comprehensive training and development on equality, diversity and inclusion.
    v. Ensure all breaches of Equality, Diversity & Inclusion Policy are reported, responded to and recorded and stored securely with restricted access.
    vi. Make available evidence of all of the above to the IPPF Director General upon request.

How to raise a concern

22. There are a number of channels through which a concern can be reported:[52]
    i. To IPPF SafeReport, IPPF's incident reporting service;
    ii. By contacting Human Resources in the respective organization;
    iii. By bringing a grievance under the relevant grievance procedure;
    iv. Under the Raising a Concern policy and procedures;
    v. By talking to a supervisor.

[52] See Raising a Concern Policy.

Glossary

There are various types of discrimination prohibited by this policy. The main types are:

1) Direct discrimination

Direct discrimination occurs where one person is treated less favourably than another because of any of the protected characteristics set out in this policy.

Direct discrimination may relate to the protected characteristics of the individual discriminated against.

It may also consist of less favourable treatment of an individual by reason of the protected characteristics of another person for example that of the partner, child or associate(s) of the person discriminated against. This is generally referred to as associative discrimination.

Direct discrimination will occur when someone is less favourably treated by reason of a protected characteristic they are wrongly thought to possess, as where someone is thought to be disabled or of a particular ethnic or gender identity. This is generally referred to as perceptive discrimination.

2) Indirect discrimination

Indirect discrimination occurs when the same requirement, condition, provision or practice is or would be applied to everyone, but which has a disproportionate, adverse effect on one or more groups of people defined by reference to a protected characteristic, unless the application of the requirement, condition, provision or practice is justifiable notwithstanding its disparate impact.

3) Failure to make reasonable adjustments

A failure to make reasonable adjustments to accommodate disability-related needs will also amount to discrimination.

4) Victimization

Victimization occurs when a person is treated less favourably than others because they have raised a genuine grievance or concern.

5) Harassment

Harassment is unwanted conduct related to age, sex, sexual orientation, gender, gender identity or expression, race, ethnic or national origin, religion or belief, partnership status, pregnancy or parental status, disability, health or any other personal status which has the purpose or effect of violating an individual's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that individual.[53]

As adopted by Governing Council, November 2018

[53] See Respect at Work Policy – Policy 1.18 for further details on Bullying and Harassment

Last amended by Governing Council, May 2020

1.22 EMPLOYMENT PRINCIPLES

Introduction

1. IPPF strives to be a good employer and to provide safe and healthy working conditions where individual performance is recognized, team effort and commitment are valued, and career opportunities are fostered.
2. The structure of this policy follows the cycle of recruitment, to employment or engagement and post-employment or engagement.

Purpose and Scope

3. This policy sets out the values framework of IPPF. It applies to the IPPF Secretariat, Member Associations, collaborative partners and other partners in their relations with staff.
4. Some aspects of this policy apply to IPPF's volunteers and trustees.
5. This Policy is intended to set out the guiding principles and values applicable to all elements of IPPF (its Secretariat, Member Associations, members of the General Assembly, Nominations and Governance Committee, Board of Trustees, Finance, Audit & Risk Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee, and governing bodies of Member Associations). These guiding principles and values need to be implemented through the relevant regional and local policies and procedures.

Definitions

- **IPPF staff** refers to all paid staff: permanent, fixed term and temporary staff; it includes employees, agency workers, consultants, interns and contractors.
- **IPPF employees** refers to individuals on a paid employment contract.

Guiding Principles

- Individuals starting work with IPPF must demonstrate their belief in and commitment to the Principles and Articles enshrined in the IPPF Declaration of Sexual Rights. All staff must sign the IPPF Code of Conduct outlining their responsibilities and obligations.

6. Before starting work with IPPF

a. IPPF Values

IPPF's core values guide the way work is undertaken and shape the workplace. IPPF believes:

i. in social inclusion with a demonstrated commitment to enabling the realization of the rights of the under-served respecting all without discrimination;
ii. that passion and determination provide the inspiration to have the courage to challenge and seek social justice for all;
iii. in the significant contribution volunteers deliver across a range of roles inspiring the Federation to advance its mission;

iv. in accountability as a cornerstone of trust which is demonstrated through high performance, ethical standards and transparency.

b. Equality and Diversity in Recruitment and Promotion

The principle of non-discrimination will apply to the hiring and promotion of staff and the engagement of volunteers and trustees across the Federation. The hiring and promotion practices of the Federation shall not discriminate on the basis of age, sex, sexual orientation, gender, gender identity or expression, race, ethnic or national origin, religion or belief, partnership status, pregnancy or parental status, disability health or any other status. The Federation may take proportionate means to promote substantive equality in its hiring practices where this is compliant with the applicable legislation.[54]

c. Safe Recruitment

IPPF is committed to following agreed best practice in safe recruitment as part of its commitment to its safeguarding duties. This includes:

i. Detailed application forms and job descriptions which include appropriate references to safeguarding;
ii. Self-disclosure forms;
iii. Criminal record checks;
iv. Verification of qualifications and experience;
v. Robust interviews that include safeguarding, equality, and diversity;
vi. A minimum of two reference checks;
vii. Code of conduct as part of contract;
viii. A thorough induction process which includes safeguarding procedures;
ix. Disclosure of misconduct in giving references.

The Safeguarding (Children & Vulnerable Adults) Policy contains a Safe Recruitment checklist which is applicable to all IPPF staff.[55] It will also apply where relevant to the recruitment of volunteers and trustees.

d. Fair recruitment

All candidates should expect a structured, fair and consistent process that is transparent, non-discriminatory and recruits based on a candidate's qualifications, skills and experience. Personal information of candidates will remain confidential in line with relevant local data protection legislation. IPPF will provide reasonable adjustments to all people with disabilities to seek to ensure they are not disadvantaged in the recruitment process.

7. ***When working with IPPF***

IPPF values its volunteers, trustees and staff and intends to treat all those working for the Federation with utmost respect. IPPF volunteers, trustees and staff should be provided with the working conditions that allow them to operate effectively. These include robust policies and procedures that underpin IPPF's principles of good employment as outlined in this policy.

a. Terms and Conditions of Employment

IPPF aims to attract and retain the best possible candidates who will contribute to the success of the Federation. To achieve this, a strong package of salary and benefits shall be

[54] IPPF Equality, Diversity and Inclusion Policy
[55] Safeguarding (Children & Vulnerable Adults) Policy

offered which is aligned to good local employers in a similar industry. Examples of employee benefits include health and life insurance, fair leave package (annual, parental, illness, family), flexible working, childcare support and pension.

IPPF acknowledges the right of all employees to join and be represented by recognized Trade Unions if they so choose.

b. Health and Safety at Work

The health and safety of all volunteers, trustees and staff across the Federation is paramount. This ranges from ensuring safe, healthy working conditions to the safety of those in humanitarian and disaster settings and the safety of IPPF staff travelling on behalf of the Federation. To uphold this commitment, all IPPF staff should be supported under employee travel safety procedures and guidance tailored to the local environment and in adherence with local legislation. The Federation's Safety and Security Risk Management Policy underpins this commitment by outlining the Federation's values around safety and security and providing further guidance on developing a robust safety and security management system.[56]

c. Volunteer, trustee & staff wellbeing

The personal and professional wellbeing of IPPF volunteers, trustees and staff is a priority. As a responsible employer, IPPF must work to manage the welfare of its workforce, including volunteers and trustees. Positive contributions to employee wellbeing may include an employee assistance programme, mental health awareness and support, healthy living support, disease prevention programmes, and others as appropriate.

d. Respect at Work

IPPF is committed to operating with integrity. It embraces dignity and respect and believes that everyone has the right to work in a safe and fair environment which is free from all forms of unacceptable behaviour, including bullying, harassment and sexual harassment. Such behaviour by IPPF volunteers, trustees and staff shall not be tolerated in any circumstances.

e. Equality, Diversity and Inclusion

Equality, diversity and inclusion are integral to IPPF as a global sexual reproductive health and rights organization where the core principles are founded on non-discrimination, fairness and opportunity.

IPPF will not discriminate because of age, sex, sexual orientation, gender, gender identity or expression, race, ethnic or national origin, religion or belief, partnership status, pregnancy or parental status, disability health or any other status.[57]

IPPF also recognizes it is required to make reasonable adjustments to ensure people with all forms of disabilities are not at a disadvantage in the workplace.

IPPF will take proportionate measures to redress disadvantage and under-representation linked to protected characteristics where this is permitted by law.

IPPF will ensure there is an equitable pay and reward structure for employees which does not discriminate directly or indirectly on any of the protected characteristics.

[56] IPPF Safety and Security Risk Management Policy – IPPF Policy Handbook
[57] IPPF Equality, Diversity and Inclusion Policy

IPPF supports this belief with the following Federation wide policies: Equality, Diversity and Inclusion; Gender Equality; Linking HIV and Sexual and Reproductive Health and Rights; Safeguarding (Children & Vulnerable Adults) Policy and Meeting the Sexual and Reproductive Health and Rights of the Ageing Population.

f. Raising Concerns

IPPF aims to foster a culture of openness where volunteers, trustees and staff feel able to raise concerns and genuine concerns are appropriately managed. The IPPF Raising a Concern Policy gives further information, guidance and support for employees.

g. Employee Development and Performance

All IPPF employees have the right to progress and develop their skills to achieve their full potential. This should include a robust induction and ongoing refresher and professional training (especially in the health sector) suitable to the role. This should be appropriately resourced within the Federation.

IPPF employees should be given the opportunity to review their performance and be held accountable for their actions through regular performance appraisal including a formal annual performance review.

8. ***Upon leaving IPPF***

a. Giving feedback

Upon leaving the Federation, all IPPF staff should be given the opportunity to formally give confidential feedback to an appropriate nominated colleague based upon their experience working with the Federation.

b. References

Upon leaving IPPF staff may also request IPPF to provide a reference. Where a reference is provided it must be a true, fair and an accurate reflection of the individual. In line with safeguarding best practice, IPPF will disclose all misconduct in references.

9. **Employee Redundancy**

It is the belief of IPPF that, where redundancy is unavoidable, IPPF employees should be treated fairly and equitably. Associated redundancy policies and procedures shall be implemented and well communicated. Any union associated with the organization within the Federation that is making redundancies shall be consulted in good time along with all staff affected.

Implementation

10. It shall be the responsibility of the Board of Trustees, Director-General, Regional Directors, Member Associations' boards and Executive Directors to ensure that policies that meet the above mentioned minimum standards are in place, and are implemented, monitored and reviewed accordingly.
11. IPPF Secretariat, including Human Resources shall be available to advise and support this work.
12. IPPF Member Associations, collaborative partners and Secretariat will:

i. Be aware of their responsibilities as employers.
ii. Adopt and implement policies and procedures based on the above principles and the implementation points below, whilst reflecting local legislation and requirements.
iii. Ensure their volunteers, trustees, staff and beneficiaries and local communities are aware of this policy.
iv. This policy is supported by the IPPF Standards and Responsibilities of Membership and the standards and checks under Principle 7: Good Employer.
v. Evidence of all of the above will be made available to the IPPF Director General on request.

Glossary

13. **Employee Assistance Programme:** An EAP is an employer-sponsored service designed for personal or family problems, including mental health, substance abuse, addictions, marital problems, parenting problems, emotional problems, or financial or legal concerns. This is typically a service provided by an employer to the employees, designed to assist employees in getting help for these problems so that they may remain on the job and effective. EAP has expanded to incorporate not only mental health and substance abuse issues but also health and wellness and work/life concerns.

Further information linked to this policy

- IPPF Standards and Responsibilities of Membership
- Safeguarding Policy (Children and Vulnerable Adults): Safe Recruitment Checklist

As adopted by Central Council, November 1990

Last amended by Governing Council, May 2020

1.23 INDEPENDENT COMPLAINTS PANEL

1. Introduction

1.1 IPPF places particular expectations on its officers at the highest level of the Federation. This includes a responsibility to not act in ways that may be classified as malpractice or misconduct – see paragraph 3.5, below). They are to demonstrate leadership, excellence and accountability in upholding IPPF's values and contributing to the creation of a positive organisational culture and environment.

1.2 IPPF is committed to supporting good management practice and to creating an open culture where volunteers, trustees and staff feel able to speak up and express concerns and raise complaints about their colleagues' and managers' conduct informally with them in the first instance.

1.3 IPPF is committed to protecting its volunteers, trustees and staff from any detriment, victimization, harassment or bullying as a result of raising a concern. Reports of any such behaviour will be taken seriously and managed appropriately through the relevant disciplinary process.

1.4 The Raising a Concern Policy sets out the expected standards and approaches for how complaints, concerns and whistleblowing reports are dealt with by the Federation in the spirit of accountability, transparency, effectiveness, and fairness.

1.5 IPPF expects that those working for and representing the organisation will act with honesty and integrity including by not discriminating on the basis of age, sex, sexual orientation, gender, gender identity or expression, race, ethnic or national origin, religion or belief, partnership status, pregnancy or parental status, disability, health or any other analogous personal status.[1]

1.6 This policy does not form part of any contract of employment or other contract to provide services, and IPPF may amend it at any time.

2. Purpose and Scope

2.1 This policy establishes the Independent Complaints Committee to deal with Reports (as defined below) submitted in respect of members of the IPPF Nominations and Governance Committee; the Board of Trustees, including the Chair of the Board of Trustees; the Legal Counsel; members of the Finance, Audit and Risk Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee; members of any other committee established by the Board of Trustees or the General Assembly; and the Director General; and it specifies the applicable procedure.

2.2 The Director General, the Board of Trustees or (acting together) the Chair and Vice-Chair of IPPF may refer any other Report to the Committee if they consider the matter sufficiently serious and warranting entirely independent review.

2.3 The Committee will also deal with appeals lodged by Regional Directors and Divisional Directors in respect of disciplinary decisions against them taken by the Director General under IPPF's applicable disciplinary policies and procedures.

[1] Equality, Diversity and Inclusion Policy

2.4 A Report that is (a) a grievance from an IPPF Secretariat employee about those people listed in paragraph 1 above; (b) an appeal from a disciplinary decision made by the Director General in respect of a Regional Director or Divisional Director; or (c) a disciplinary matter in respect of the Director General, shall be dealt with under IPPF's grievance policy and procedure or disciplinary policy and procedure, as appropriate. However, the individual or individuals who decide the on the grievance, disciplinary matter or appeal shall be selected from among the Committee members.

3. Definitions

3.1. **Committee** means the Independent Complaints Committee established under this policy.

3.2. **Complaint or concern** means an expression of dissatisfaction or statement of concern that relates specifically to one or more people to whom this policy applies. It can relate, for example, to malpractice, misconduct, actions taken, lack of action or behaviour. It is not a complaint or concern about IPPF's work generally; a general question about IPPF's or the individual's work; a request for information; or a suggestion about how IPPF or the individual could operate or improve its or their work.

3.3. **Incident Coordinator** is a person assigned by IPPF's Global Incident Reporting Unit or a Regional Incident Reporting Unit, to manage a Report.

3.4. **IPPF SafeReport** is a confidential, multi-lingual reporting mechanism and case management system.

3.5. **Malpractice and/or misconduct** includes, but is not limited to, the issues listed below:

(a) Financial wrongdoing including theft, bribery, fraud, money laundering and aid diversion;
(b) Failure to comply with any legal obligations;
(c) Bullying and harassment including sexual harassment of a volunteer, trustee or staff member;
(d) Abuse or exploitation, including sexual, of children, vulnerable adults or beneficiaries;
(e) Breach of IPPF's Code of Conduct or Respect at Work Policy;
(f) Abuse of authority;
(g) Danger to the health and safety of individuals or damage to the environment;
(h) Other improper conduct or unethical behaviour;
(i) Activity which would bring the organisation into serious disrepute;
(j) Concealment of information relating to any of the matters listed above.

3.6. **Outcome decision** means a decision of a Committee member or panel of Committee members deciding on a Report following an investigation, or determining an appeal.

3.7. **Report** means a complaint, concern or whistleblowing report submitted to IPPF.

3.8. **Reporter** means a person who submits a Report.

3.9. **Secretary** means a secretary appointed by the Director General to support the work of the Committee, and who shall be responsible for keeping this policy under review.

3.10. **Unmeritorious** in relation to a Report means one that does not warrant further investigation or action because it:

(a) Is not within the scope of this policy;

(b) Concerns matters that have already been addressed under this policy or any other IPPF policy or procedure;
(c) Is trivial, obviously lacks substance or appears to have no serious purpose or value;
(d) Appears malicious or mainly intended to cause inconvenience, harassment or disproportionate expense to IPPF and or any individuals complained about; or
(e) Otherwise appears frivolous, repetitive, unreasonably burdensome or unwarranted.

3.11. **Victim/survivor** means anyone alleged to have been harmed by the actions of IPPF or those under its control.

3.12. **Whistleblowing report** means any disclosure of information made by a worker which, in the reasonable belief of the worker making the disclosure, is made in the public interest and tends to show one or more of the following:

(a) That a criminal offence has been committed, is being committed or is likely to be committed;

(b) That a person has failed, is failing or is likely to fail to comply with any legal obligation to which they are subject;

(c) That a miscarriage of justice has occurred, is occurring or is likely to occur;

(d) That the health or safety of any individual has been, is being or is likely to be endangered;

(e) That the environment has been, is being or is likely to be damaged, or

(f) That information tending to show any matter falling within any one of the preceding paragraphs has been, is being or is likely to be deliberately concealed.

4. Anonymous Reports

4.1. **IPPF** would rather receive an anonymous Report than not have it reported at all. However, it may be difficult for IPPF to investigate Reports made anonymously, especially if they are not adequately substantiated.

4.2. Where IPPF is unable to investigate an anonymous Report, it will nevertheless be reviewed and logged.

4.3. Individuals concerned about being identified are encouraged to request confidentiality.

5. Unmeritorious Reports

5.1. IPPF may decide not to proceed with the investigation of a Report if it is deemed unmeritorious. In considering whether a Report is unmeritorious, IPPF recognises that:

(a) Individuals submitting a Report may be aggrieved and frustrated so the focus must be on careful consideration of the merits of the case and not the attitude of the individual.

(b) Every Report must be considered on its own merits. Even if someone has submitted a frivolous or vexatious Report in the past, it must not be assumed that any Report they submit will also be frivolous or vexatious.

5.2. Vexatious and/or persistent or repetitive frivolous Reports submitted by volunteers, trustees and workers may result in disciplinary action. It is important to stress that disciplinary action will not be taken in respect of individuals who are merely mistaken or incorrect, and that disciplinary action will only be taken when

the nature of the Reports is such that they can fairly be categorized as malicious and/or harassing and/or brought in bad faith.

5.3. Reports which if submitted by workers could result in disciplinary action may, if brought by persons external to IPPF, result in legal action.

6. Guiding Principles

The work of the Committee is guided by the following principles:

Accessibility

6.1. IPPF is committed to making the process of submitting a Report as easy as possible. IPPF's incident reporting service, IPPF SafeReport, is available in a number of different formats and languages. Support is available on request, in strictest confidence through the service, to individuals with additional needs. All Reports should be reported to IPPF SafeReport: https://ippf.safereport.eu/web

Accountability and transparency

6.2. Reports submitted to IPPF SafeReport will be acknowledged.

6.3. IPPF's Global Incident Reporting Unit will log and monitor all Reports that are received and will collate statistics for IPPF's annual reporting. IPPF will ensure that regular reviews are undertaken of the types and number of Reports and will report on those and their implications to the Board of Trustees and, as appropriate, externally.

6.4. IPPF aims to ensure that all feedback and lessons learnt from Reports contribute to service improvement and staff welfare.

6.5. IPPF will ensure it fulfils its internal escalation and external reporting responsibility in relation to sharing information about Reportable or Serious Incidents (RoSI). It has in place a RoSI policy, process and procedure to ensure timely internal escalation and external reporting where required.

Confidentiality

6.6. All Reports are processed, managed and stored in accordance with IPPF's policies on confidentiality and data privacy.

6.7. Information about a Report will be provided only to those people who need to know about it, in order for the Report to be actioned properly. Personal details about the reporter and any alleged perpetrators will remain confidential within the need-to-know group.

6.8. Where confidentiality is requested, every effort will be made to maintain this and identities will not be disclosed without prior consent, unless required by law.

6.9. Reporters should be aware that information provided to IPPF may not remain confidential from IPPF's regulators or from major funders who have a contractual right to receive certain information. Reports that contain information that IPPF considers should be reported to any regulator, the police or any other statutory authority will not be kept confidential from such regulator, the police or other statutory authority.

6.10. IPPF recognises that non-disclosure agreements do not prevent individuals from making disclosures in the public interest.

6.11. The Secretariat will undertake periodic checks to ensure compliance with IPPF's policies on collecting and using data in connection with handling Reports.

6.12. The direct report of concerns by a whistleblower to the media or otherwise to organizations outside the IPPF (including all its elements, as described above) may, depending on the appropriateness of the recipient of the information, negate the whistleblower's rights under this policy and/or under local law.

Efficiency and timeliness

6.13. IPPF will acknowledge and aim to resolve Reports in a timely manner.

Fairness

6.14. IPPF will listen to the reporter and take the time to understand what the Report is about, the reasons for it and the outcome the person expects.

6.15. Reports will be dealt with consistently and the persons investigating and making decisions will be impartial.

6.16. No volunteer, trustee or staff member will be subject to any detriment, victimization, harassment or bullying as a result of submitting a Report. This shall not, however, prevent disciplinary action being taken as described in paragraph 5.2 of this policy.

6.17. If the reporter is receiving a service from IPPF, submitting a Report will not affect the service they receive.

Protection for reporters and alleged victims/survivors

6.18. IPPF endeavours to ensure all processes relating to Reports are victim / survivor focused. This means that, while due process is followed, the needs of any victim / survivor remain at the forefront of any investigation process.

7. Functions of the Independent Complaints Committee

7.1. The functions of the Committee shall be:

(a) To consider and determine Reports referred to it in accordance with this policy.

(b) To consider and determine appeals from Divisional Directors and Regional Directors from decisions made by the Director General under IPPF's applicable disciplinary policies and procedures (to be dealt with by Committee members in accordance with such disciplinary policies and procedures).

(c) To consider and determine any other Report referred to it by Director General or the Board of Trustees which they consider sufficiently serious and warranting entirely independent review.

7.2. In performing their functions, the Committee members shall have regard to and shall comply with all applicable written policies and procedures of IPPF.

8. Composition of the Independent Complaints Committee

8.1. The Committee shall be a standing committee of people who are independent of IPPF and from whom panels can be drawn.

8.2. No Committee member shall be a person who has held office as a member of the Nominations and Governance Committee, Board of Trustees, Legal Counsel, a member the Finance, Audit and Risk Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee or any other committee established by the Board of Trustees, or a member of the governing body of any Member Association of IPPF.

8.3. No Committee member shall be a person who has been an employee of IPPF Secretariat or any Member Association.

8.4. IPPF shall seek to ensure diversity among the Committee members.

8.5. Each Committee member should be a person of good character and standing selected with a view to ensuring:

(a) Support for IPPF's vision, mission and values.
(b) Independence, impartiality and objective judgement.
(c) Honesty and integrity.
(d) Ability to be analytical, to synthesise information and consider the consequences of decisions.
(e) Tact and diplomacy linked to a willingness to make fair decisions even where they may be unpopular.
(f) Good communication and interpersonal skills.
(g) Ability to maintain confidentiality.
(h) Commitment to equality, diversity and inclusion.
(i) Commitment and willingness to devote the necessary time to serve IPPF as a member of the panel.

9. Appointment, Retirement and Removal of Committee Members

9.1. The Committee members shall be appointed by the Chair of IPPF following recommendations made by the Director General.

9.2. Committee members shall be appointed for renewable terms of up to three years.

9.3. The Chair of IPPF shall seek to ensure continuity of knowledge and experience on the Committee such that not all of the Committee members retire at the same time.

9.4. The Chair of IPPF may appoint one member of the Committee as the Chair of the Committee and may remove that person from that office.

9.5. The Chair of IPPF may appoint one member of the Committee as the Vice-Chair of the Committee and may remove that person from that office.

9.6. If no appointments of Chair or Vice-Chair of the Committee are made, the Committee members may make such appointments from among their own number.

9.7. On appointment, each Committee member shall enter into an agreement with IPPF regulating the Committee member's relationship with IPPF, including their obligations as to confidentiality.

9.8. Once appointed, a member of the Committee may not be removed as a Committee member except by a 75% majority vote of those Trustees present and voting at a meeting of the Board of Trustees.

10. Conflicts of Interest of Committee Members

10.1. The Committee members shall follow the same procedures for declaring and managing conflicts of interest as must be followed by members of the Board of Trustees.

11. Secretariat Support

11.1. The Secretariat shall provide to the Committee such assistance as the Committee may reasonably require to enable it to perform its functions effectively and efficiently.

11.2. The Director General may appoint one or more individuals as Secretary to co-ordinate Secretariat support to the Committee and perform other tasks as required by this policy.

12. Insurance and Indemnity

12.1. IPPF shall, so far as it is able, procure that members of the Committee are insured in respect of the performance of their functions to the same extent as members of the Board of Trustees are insured in respect of their functions.

12.2. To the extent that any liability incurred by a Committee member in the exercise of their functions is not covered by insurance (unless that deficiency arises from the relevant panel member's own wilful or reckless act or omission) IPPF shall indemnify the Committee member in respect of that liability.

13. Procedure

The procedure set out in the attached schedule shall be followed in relation to Reports to be addressed under this policy.

14. Conflict of Procedures

14.1. If a Member Association receives a Report in respect of a person to whom this policy applies but the Report relates principally to the Member Association or to acts or omissions of that person in respect of any position held with the Member Association:

14.2. That Member Association shall manage the Report in accordance with its own policy and procedure and shall keep the Regional Director and the Director General informed of the progress and outcome of the Report, subject to any restrictions imposed by applicable local law.

14.3. If for any reason the Member Association does not manage the Report or does not commence its complaints procedure within a reasonable time, IPPF may manage the Report in accordance with this policy and the relevant body must co-operate with the investigation.

14.4. Neither IPPF nor the Member Association shall commence its procedure for managing the Report while the other is doing so.

14.5. If the Secretariat receives a Report that should instead be addressed by a Member Association in accordance with paragraph 13, the Secretariat shall promptly refer the matter to the Member Association.

15. Other Complaint Mechanisms

Anyone wishing to complain about IPPF may complain to relevant regulators such as the Charity Commission for England and Wales, the Information Commissioner and the Fundraising Regulator. However, IPPF hopes that anyone wishing to complain will first raise the matter with IPPF in accordance with this policy. Depending on the nature and seriousness of the matters raised, IPPF may in any case make its own report to relevant regulators.

Schedule

Procedure in Relation to Reports to be Addressed Under this Policy

1. Initial Consideration and Appointment of Investigator

1.1 Where possible, Reports in accordance with this policy should be submitted through IPPF SafeReport. IPPF's Global Incident Reporting Unit will refer every relevant Report to the Secretary for consideration.

1.2 Once reported via IPPF SafeReport: https://ippf.safereport.eu/web , Reports are assessed by the Global Incident Reporting Unit and assigned to an Incident Coordinator in consultation with the Secretary. Conflicts will be considered when appointing the Incident Coordinator. IPPF may appoint a new Incident Coordinator at any stage.

1.3 If the Report is not one that is subject to this policy, or if the Secretary, in consultation with a Committee member, dismisses it immediately as unmeritorious, the reporter, unless anonymous, will be informed. The reporter will be given brief reasons and may be directed to another policy or process. No further action will be taken by IPPF to attempt to resolve the subject matter of the Report. There is no appeal from such decision.

1.4 Unless the Report is anonymous, the Incident Coordinator will normally engage with the reporter to discuss the Report and whether there is an opportunity to resolve it informally. Following such engagement, the Incident Coordinator will decide if an investigation is warranted. If the Incident Coordinator, in consultation with IPPF's Director of People, Organisation and Culture (or another appropriate member of IPPF's senior management team or Committee member) decides that an investigation is not warranted, they will dismiss the Report. The reporter will be given brief reasons and may be directed to another policy or process. No further action will be taken by IPPF to attempt to resolve the subject matter of the Report.

1.5 If the Report is made in any other way and is not anonymous, the Secretary shall acknowledge it and provide the complainant with a data privacy notice. The Secretary shall ensure that the Report is logged onto IPPF SafeReport for recording and reporting purposes.

1.6 Anyone deciding whether a Report is unmeritorious or that it should be dismissed at the initial stage for any reason shall act in good faith in accordance with the following principles:

1.7 Individuals submitting a Report may be aggrieved and frustrated so the focus must be on careful consideration of the merits of the case and not the attitude of the individual; and

1.8 Every Report must be considered on its own merits. Even if someone has submitted an unmeritorious Report in the past, it will not be assumed that any other Report they submit will also be frivolous or vexatious, although it may be a relevant factor when reaching a decision.

2. Confidentiality

2.1 If the reporter has requested anonymity, or that their information remain confidential, the investigator shall consider whether the matter can be fairly and properly investigated without that anonymity being compromised and while maintaining confidentiality. If the investigator considers that anonymity or

confidentiality may be compromised, they shall inform the reporter and request the reporter's consent to share relevant information with relevant people.

2.2 If the reporter refuses to allow such details to be shared, the investigator may note that refusal as a cause of any limitations in the investigation.

3. Conduct of Investigations

3.1 The investigator shall conduct the investigation in accordance with their terms of reference supplied by the Incident Coordinator and otherwise as they think appropriate. They will normally make inquiries of those people within the organisation who are affected by or implicated in the matter, as well as others whom they consider may have relevant information, and shall:

(a) Inform those people of the investigation and the reason for it; and

(b) Provide them with a data privacy notice unless providing them with a privacy notice would prejudice the investigation (in which case data privacy notice shall be provided to them at the earliest opportunity once the risk of prejudicing the investigation has passed).

3.2 The Incident Coordinator and investigator may seek legal or other expert advice if required, with the prior approval of the Secretary.

4. Co-operation with Investigation Process

Members of the IPPF staff and volunteers (including members of the Board of Trustees and all Committee members) must co-operate with the investigation process and provide such information in relation to the investigation as may be requested of them.

5. Consideration of Investigation Report by the Secretary

5.1 If the matter has been referred to the Committee by the Director General, Board of Trustees or (acting together) the Chair and Vice-Chair of IPPF, the matter shall proceed to the panel consideration stage. For all other Reports, the Incident Coordinator shall consider the investigator's report and decide whether to refer it to the panel consideration stage.

5.2 If the Incident Coordinator decides not to refer the Report to a panel of Committee members for consideration, they shall dismiss the Report. The reporter will be given brief reasons and may be directed to another policy or process. No further action will be taken by IPPF to attempt to resolve the subject matter of the Report. There is no appeal from such decision.

6. Panel Consideration Stage

6.1 If the matter is to proceed to the panel consideration stage, the Secretary shall select three Committee members to form a panel to consider the report and its findings and recommendations.

6.2 The panel shall receive the reporter's statement and the investigator's report and may request further information from any person.

6.3 The panel shall decide the process for considering the matter and may, but need not, conduct a hearing at which the reporter and any person permitted by the panel may address the panel in person. If a hearing is to take place, this may be conducted face to face or by electronic means.

6.4 The panel may request the Secretary to procure legal or other expert advice for the panel.

7. Companions

7.1 The panel may permit any person addressing it to be accompanied by a companion but no one shall be represented by legal counsel at any hearing of the panel or on any appeal.

7.2 The identity of any companion must be notified in advance to the Secretary, who may approve or decline their attendance. A companion may not be someone whose presence will prejudice the meeting or who might have a conflict of interest.

7.3 A companion may accompany and support an individual but not speak on their behalf unless, in exceptional circumstances, permitted to do so by the panel.

7.4 A companion who is an IPPF Secretariat employee is entitled to reasonable paid time off to familiarise themselves with the Report and to attend the meeting.

8. Outcome Decisions by the Committee

8.1 A Committee member or panel shall have the following powers in relation to Reports under this policy[2]:

(a) To uphold or dismiss the subject matter of the Report;

(b) To require an apology or explanation to be given by IPPF;

(c) To recommend an award of compensation provided that IPPF may, before paying such compensation, require the reporter to enter into a compromise agreement settling all claims against IPPF in respect of the matters complained of;

(d) To recommend mediation, where appropriate, and how that should be undertaken. In considering whether to recommend mediation, the relevant Committee member(s) shall have regard to the possible inappropriateness of mediation in cases where there are safety issues for the reporter and there is an imbalance of power between the reporter and the person against whom the Report is made, such as for example in Reports regarding gender violence;

(e) To recommend the resignation of any IPPF volunteer (including a member of the Nominations and Governance Committee, Board of Trustees, the Legal Counsel, a member of the Finance, Audit and Risk Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee, and a member of any other committee set up by the Board of Trustees or the General Assembly);

(f) To remove from office any volunteer (including a member of the Nominations and Governance Committee, Board of Trustees, the Legal Counsel, a member of the Finance, Audit and Risk Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee, and a member of any other committee set up by the Board of Trustees or the General Assembly);

(g) Upon deciding on a person's removal from office under paragraph (f) above, to suspend that person from office until the completion of any appeal;

(h) To recommend that any person be prohibited from serving as a volunteer on IPPF's Nominations and Governance Committee, Board of Trustees, Finance, Audit & Risk Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee and any other committee set up by the Board of Trustees or

[2] Note: where a Committee member or panel is taking a decision in accordance with IPPF's disciplinary or grievance policies and procedures, the Committee member or panel has the powers in the relevant policy or procedure, and the powers set out in this paragraph 8.1 do not apply.

the General Assembly (whether as a member, officer or otherwise), for a period of up to ten years;

(i) To recommend the making of a report to relevant regulators if such a report has not been made already;

(j) To recommend the implementation of changes within IPPF's policies, procedures and practices to ensure that similar situations do not arise.

8.2 Every outcome decision shall be accompanied by a statement of reasons.

8.3 The Secretary shall promptly notify the outcome decision to the IPPF Chair, the Director General and the subject of the Report.

8.4 The Secretary shall promptly inform the reporter (and may inform any other person directly affected by the matter) whether the subject matter of the Report has been upheld but otherwise the Secretary shall have complete discretion as to what information about the outcome decision is provided to them.

9. Appeal of Decisions

9.1 The reporter shall not be entitled to appeal an outcome decision.

9.2 IPPF and any other person who is the subject of an outcome decision may appeal the decision within 14 days of being sent details of the decision. The request for an appeal must be accompanied by a statement of reasons for the request. On receipt of the request for an appeal, the Secretary shall select another Committee member (not involved in the original decision) to consider the grounds and decide whether or not the appeal will be considered. If the appeal is to be considered, the Committee member taking that decision may consider the appeal or may appoint one or more members of the Committee (who have not been involved in the original decision) to consider the appeal. The decision whether or not to consider an appeal shall be final and not subject to appeal.

9.3 The Committee member deciding whether to permit an appeal and the Committee member(s) considering the appeal may require that any additional evidence relevant to the initial Report be investigated. Such investigation shall be conducted in accordance with paragraphs 2 to 45.2 of this schedule.

9.4 The Committee member(s) considering the appeal shall decide the process for considering the appeal and may, but need not, conduct a hearing at which the person making the appeal may address the Committee member(s) in person. Any such hearing may be conducted face to face or by electronic means.

9.5 The Committee member(s) considering the appeal) may request the Secretary to procure legal or other expert advice and the Secretary shall discuss any such request with the person within IPPF who is principally responsible for procuring such advice, provided that they do not have a conflict.

9.6 The Committee member(s) considering the appeal may permit any person attending a hearing to be accompanied by a companion (on the same basis as set out in paragraph 7 of this schedule) but no one shall be represented by legal counsel at any hearing of the appeal panel.

9.7 The Committee member(s) considering the appeal may:

(a) Uphold or dismiss the appeal;

(b) Substitute their own decision for the decision of the first panel, exercising the same powers as the first panel;

(c) Remit the decision for reconsideration by the first panel.

9.8 The Secretary shall promptly notify the appeal outcome decision to the IPPF Chair, the Director General and the appellant.

9.9 The Secretary shall promptly inform the reporter (and may inform any other person directly affected by the matter) whether the appeal has been upheld but otherwise the Secretary shall have complete discretion as to what information about the appeal outcome decision is provided to them.

9.10 The appeal outcome decision shall be accompanied by a statement of reasons.

9.11 The appeal outcome decision shall be final and not subject to further appeal.

10. Record Keeping

The Secretary shall procure that a proper record of the Report is made in IPPF SafeReport. This includes investigation reports, interview transcripts, written evidence submitted, decisions made and statements of reasons.

11. Implementation of Decisions by IPPF

11.1 In the case of every outcome decision requiring action to be taken, IPPF shall, so far as it is able, procure the implementation of the decision within 30 days of the decision or of any decision of the appeal panel.

11.2 In the case of every recommendation of a panel or panel member, the Director General shall consider the recommendation and determine whether IPPF will accept and implement the recommendation.

11.3 In the case of every recommendation of a panel or panel member that a person be prohibited from serving as a volunteer (in any capacity) of the General Assembly, Nominations and Governance Committee, Board of Trustees, Finance, Audit & Risk Committee, Policy, Strategy and Investment Committee and Resource Allocation Technical Committee, and any other committee set up by the Board of Trustees or the General Assembly, the Secretary shall promptly notify the relevant governing bodies, committees and Member Associations.

11.4 The Secretary shall promptly notify the panel, the reporter and anyone who is the subject of a decision of the panel, of IPPF's decision whether or not to implement the panel's recommendations and shall provide IPPF's reasons.

12. Standard of Proof

Every person deciding on the subject matter of any Report or on any review of a decision shall decide every question of fact on the basis of the balance of probability.

13. Relationship with Legal Proceedings

If any person commences legal proceedings against IPPF or against any volunteer, trustee or member of staff of IPPF in respect of the subject matter of a Report, IPPF may discontinue this procedure in respect of the matter and the Committee shall discontinue this procedure on request from IPPF.

As adopted by IPPF Governing Council, November 2018

Amended by IPPF Board of Trustees, November 2023

1.24 CONFLICTS OF INTERESTS AND ROLES POLICY FOR IPPF'S GOVERNING BODIES

Introduction

1. IPPF has a responsibility to ensure that it always acts in the best interests of its stakeholders (clients, supporters, volunteers, staff, etc). This includes ensuring that the personal interests, other roles, or loyalties of members of IPPF governing bodies (Nominations and Governance Committee-NGC, Board of Trustees - BoT, Board's Committees, etc.) do not prevent them from acting and deciding in the best interests of the Federation.

2. Conflicts of interests and roles can damage IPPF's reputation and the confidence, and trust of the Federation's clients, supporters, volunteers, staff, donors, as well as the broader public. Harmful effects and impacts can be minimised or avoided by proactively identifying and dealing with the conflicts that may arise.

3. As per the UK Charity Act 2011, Section 122, a trustee of a Charitable Incorporated Organisation (CIO) may not benefit personally from an arrangement or transaction entered into by the CIO if before the arrangement or transaction was entered into, the trustee did not disclose to all the charity's trustees any material interest (whether direct or indirect) that the trustee had in it, or with any other person or body party to it. Hence, the UK Charity Commission (CC) expects each trustee to take appropriate, timely steps to mitigate such conflicts.

Purpose and Scope

4. This policy sets out IPPF's approach to managing actual, perceived, and potential conflicts of interests or roles. Its purpose is to ensure that the integrity and reputation of the governing bodies of IPPF are not compromised, to strengthen transparency in its governance practices and support full compliance with applicable legal requirements.

5. The Board of Trustees and its committees must act in the best interest of the Federation. It is a responsibility that passes down to all members of IPPF Governing Bodies.

6. Wherever the policy refers to IPPF's Governing Bodies, those include the Nominations and Governance Committee, the Board of Trustees, Board Committees, etc. It does not cover IPPF's Member Associations or any other partnerships. However, those entities are encouraged to develop their own policies on these matters, learning from this example.

7. This policy also sets guidance for IPPF's governing bodies and staff as they initiate and implement the Conflicts of Interests/Roles policy. The standard form "Declaration of Material Transactions and Interests/Roles" is to be used alongside the policy.

8. Trustees/Committee members must ensure the information they provide is up-to-date. They must complete and provide conflicts-related information in a timely way, doing so at the start of each year and at any time when a change affects their previously declared status.

Definitions

9. **Trustee** means a person who is serving on IPPF's board of trustees as a voting member. The Board of Trustees has ultimate responsibility for overseeing the activities of IPPF Secretariat, in line with the requirements of the Charities Act, 2011 and as prescribed by IPPF Act and Regulations, its Procedural Byelaws and the relevant policies.

10. **Committee member** refers to a person either serving in IPPF's Nominations and Governance Committee (NGC) or one of IPPF's board committees.

11. A **conflict of interest** is also known as a duality of interest. A conflict, or duality, of interest, may occur when a member of the board/committee is prevented from being, and being seen to be, unconditionally loyal to IPPF. Conflicts of interest can be nuanced and are not necessarily financial in nature. Conflicts of interest can also arise from personal, professional, or voluntary interests or relationships and may cause decisions to be made, or be seen to be made, that are not in IPPF's interests.

12. A **conflict of role** may happen when there are competing or contradictory demands placed on an individual in the fulfilment of his/her/their roles for different organisations or within the same organisation. Individuals may experience, or be seen to have, a conflict of role when they are pulled in different, competing or separate directions by the various positions they hold.

13. A **breach of duty** may occur when a trustee/committee member fails to do, or is seen to fail to do, something that he/she/they is/are legally or ethically responsible for.

14. **Connected person** means family members, relatives, or business partners of the trustee/committee member, as well as businesses or organizations in which a trustee/committee member has an interest, through ownership, position or influence.

15. **Violations** are said to have occurred when IPPF has reasonable evidence that a trustee/committee member has failed to disclose actual or possible conflicts of interest or roles.

16. There are two common types of conflicts of interest: financial conflicts and loyalty conflicts.

17. A **financial conflict** may occur when a trustee, or a person or organisation or any entity connected to a trustee/committee member, benefits financially, directly or indirectly, including through receipt of money, property, equipment, goods or services, as a result a decision made by IPPF.

18. A **loyalty conflict** may occur when a trustee/committee member owes, or is seen to owe, loyalty to family, friends, employers, institutions or other organisations that is in conflict with, or seen to be in conflict with, the interests of IPPF. A

completing or conflicting loyalty may prevent, or be seen to prevent, a trustee/committee member from making decisions that are in IPPF's best interests. For example, when a global trustee/committee member serves on a Member Association board, it may create, or be seen to create, a loyalty conflict, specifically if IPPF's global interest are not prioritised over those of the national organisation.

19. **Expenses** mean refunds made by IPPF for legitimate costs that a trustee/committee member has met personally in order to carry out his/her/their official duties for IPPF. Evidence of the reasonable costs incurred is expected and is usually supported by presentation of associated bills or receipts.

20. **Trustee/Committee member benefit** means any instance where money, or property, equipment, goods, or services that have a monetary value, are received by a trustee/committee member from IPPF.

21. **User Trustee/Committee member** means any trustee/committee member who as a beneficiary of IPPF, makes use of the equipment, facilities, services, or support that are provided as part of the charitable purposes from IPPF.

Guiding Principles

The Conflicts of Interests and Roles policy for IPPF's Governing Bodies is guided by the following principles:

22. **Always act in the interest of the Federation:** All trustees/committee members are duty-bound to act only in the best interests of IPPF and to place those interests above their private interests when carrying out their official duties. Each trustee/committee member of IPPF has an individual responsibility to declare any conflict that they perceive. The onus of the timely declaration is on individual trustees/committee members.

23. **Ethics and Integrity:** IPPF expects each trustee/committee member to demonstrate a strong commitment to integrity and ethical values including the highest personal and professional ethics and to be committed to representing without compromise, the interests of the Federation and its stakeholders.

24. **Transparency:** IPPF expects full transparency and total openness from each trustee/committee member in fulfilment of the Conflicts of Interests and Roles policy. IPPF in turn commits to transparency in its management of conflicts of interests and roles, as per its transparency policy.

25. **Accountability:** IPPF trustees/committee members are accountable for any actual, potential, or perceived conflicts of interest or roles that apply to them.

26. **Fairness:** IPPF will ensure that each trustee/committee member is treated equally in its application of this policy, irrespective of their role or responsibilities or positions.

27. **Risk-based approach:** IPPF commits to a risk-based approach in assessing and managing risks associated with actual and perceived conflicts of interests and roles.

Policy

28. The Conflicts of Interests and Roles policy is prepared in alignment with: 'IPPF Act and Regulations', 'Charity Commission', and the Charity Act, 2011, UK.

29. This policy applies to all IPPF's Governing Bodies. It does not apply to Governing Bodies of Member Associations (MAs) or IPPF's other partners. It is the responsibility of individual MAs and partners to develop their own policies.

30. All IPPF trustees/committee members shall undertake their duties and make their decisions only in the best interests of IPPF. This means that all must regularly consider and routinely report actual, potential, or perceived conflicts of interests/roles to ensure potential negative effects on IPPF can be eliminated.

31. Each trustee/committee member shall undergo the following steps at least annually. However, this process will be repeated at any time when a change of circumstances affects the accuracy of the previously declared status as reported to IPPF governance authorities:

    i. Step 1: Initiate the process

    ii. Step 2: Identify and declare a conflict of interest and/or role proactively

    iii. Step 3: Follow the laid-down process and deal accordingly with any conflicts of interests or roles

    iv. Step 4: Document and develop a brief report

    v. Step 5: Take appropriate actions advised by the governing body of relevant authorities

32. A trustee/committee member shall also declare to the meeting chair before or after the distribution of the agenda for their governing body meeting, any agenda item with which they may have a conflict. Such a declaration shall be recorded in the minutes of the meeting, as will be the subsequent action taken to protect the interests of the Federation.

33. In cases of a conflict of interest and/or role, the trustee/committee member shall be advised by the IPPF relevant authority (e.g. BoT Chair, NGC Chair, Board Committee Chairs, IPPF Honorary Legal Counsel, Director-General, Governance team, etc.) on action need to avoid the conflict, such as by:

    i. Recusing from the discussion or decision of a particular agenda item

    ii. Not pursuing a course of action

    iii. Proceeding with the issue differently so that a conflict of interest/role does not arise

    iv. Securing or offering a resignation.

34. A conflict of interest or role may arise when a decision involves a potential benefit for a trustee/committee member. Where this is the case, the trustee/committee member:

    i. Shall recuse (or be asked to recuse) him/herself/themselves from any involvement in the relevant decision-making process.

    ii. Must follow such conditions as are determined by the relevant IPPF authority necessary to manage the conflict of interest/role appropriately.

35. In case of a disagreement between the trustee/committee member on the conflict assessment and the proposed actions to be taken by an IPPF authority, there is a possibility for an appeal. The trustee/committee member may appeal by asking for a reassessment of his/her/their case before the next most senior authority. The decision of such authority shall be final. The next most senior authority will follow the order listed under clause 44 of this policy.

36. The Conflicts of Interests and Roles policy will be updated by IPPF from time to time.

Implementation

37. The conflicts of interests and roles process is initiated by completing the form designed (Annex 1) for declaring the information regarding an actual or perceived conflict of interest and/or role:

    i. On initial appointment as a trustee or committee member

    ii. At the start of each year

    iii. Any time a material change occurs in the status of a trustee/committee member in respect to the questions set out in IPPF's form "Declaration of Material Transactions and Interests / Roles"

    iv. Whenever information concerning a conflict of interest or role is brought to IPPF's notice by another party - internal or external to IPPF.

    v. Before or when any decision is to be made in regard to which the trustee/committee member knows they may have or be perceived to have a potential conflict of interest or role.

38. The form for declaring the relevant information (Annex 1) will be provided in IPPF's working languages.

39. Each trustee and committee member will complete and sign the form "Declaration of Material Transactions and Interests/Roles". Such declarations must include disclosure of actual, potential and/or perceived conflicts of interests and roles.

40. Completed/filled forms issued to trustees and committee members are to be returned to the Secretariat within a week of their receipt.

41. The completed forms will undergo an initial review by IPPF's governance team.

42. Where the team identifies a potential material conflict of interest and/or role, the case will be referred to IPPF's Legal, Risks & Assurance Team. If required, additional information will then be requested from the trustee/committee member.

43. Where it is deemed that a conflict of interest/role requires resolution, a brief report will be submitted to the appropriate body/authority by the governance team: i.e., the Board or Committee Chair, in consultation with IPPF Honorary Legal Counsel.

44. If the conflict of interest/role concerns a Board Committee Chair, the matter shall be considered by the Chair of the Board of Trustees, in consultation with IPPF Honorary Legal Counsel. If the conflict of interest concerns the Chair of the Board of Trustees, the matter shall be considered by the Chair of NGC, in consultation with IPPF Honorary Legal Counsel. Similarly, if the conflict of interest concerns the

Chair NGC, this will be considered by the Honorary Legal Counsel in consultation with IPPF Board Chair and IPPF Director General.

45. In consultation with the Governance Team, and/or with the Director General and/or IPPF Honorary Legal Counsel as appropriate, the relevant authority will determine the next steps. If required, additional legal advice (internal or external) may be sought.

46. Where a conflict of interest and/or role is established to be material, the relevant governance authority, in consultation as appropriate, will determine the course of action to be taken to remove or resolve the conflict of interest.

47. The trustee/committee member is obliged to comply with the required action.

48. The overall process will be facilitated by the Governance Team in consultation with the Legal, Risk & Assurance Team.

Adopted by IPPF Board of Trustees, March 2022

THE FEDERATION

Annex 1

Declaration of Material Transactions and Interests/Roles Form

(to be completed by each trustee /committee member)

Name:

_____

Position in the Board/ Committee:

_____

Question	**Answer**
1. Do you hold a position within a Member Association? If so, please provide details.	
2. Do you hold a position within any other organisation that receives funds from IPPF? If so, please provide details.	
3. Do you hold a position with a donors that provides funding to IPPF? If so, please provide details.	
4. Do you hold a position, paid or unpaid, with a supplier of goods and/or services to IPPF, or member associations of IPPF, or any other organisation receiving funds from IPPF? If so, please provide details.	
5. Please list all public roles that you hold, whether voluntary or paid.	
6. If you have received any of the following benefits as a result of your position in IPPF, or in a member organisation or one funded by IPPF, please provide details of: a. a salary, honorarium, fee or allowance; b. a loan of any kind*; c. provision of accommodation; d. free or discounted travel (except exclusively when on IPPF business); e. gifts of goods or services; f. goods or services supplied below market value; g. any other benefit. **If a loan of any kind, please provide the current balance and the highest balance in the previous 12 months.*	

Question	**Answer**
7. Please provide details of the following: a. Please describe any relationships, transactions, positions you hold (volunteer or otherwise), or circumstances that you believe could contribute to, or be seen to contribute to, a conflict of interest and or role: b. Any possibility, connection, or potential conflict with any of the work items of Board/Committee (e.g., work plan, etc) regarding your role and responsibility at IPPF. *(A trustee/committee member is expected to report proactively on point 'b' whenever it is applicable, and share the form with governance authorities)*	
8. Does any *relative*[1] have any of the interests (financial or non-financial) in IPPF that may cause a trustee/committee member to have or be perceived to have conflict of interest and/or role? If so, please provide details.	
9. Is any *relative (as defined in the footnote below)* employed by a Member Association or a partner receiving funds from IPPF, either as a staff member or as a consultant? If so, please provide details including position held.	

I certify that the information given above is complete and correct, to the best of my knowledge and belief.

_____
Signature

_____
Name (Printed)

_____
Place (Country)

_____
Date

[1] *Relatives include 'spouses, partners and co-habitees, parents, grandparents, siblings, children, grandchildren, cousins and in-laws'.*

2 THE SECRETARIAT

Policy 2.1

2.1 THE SECRETARIAT

1. All the employees of the IPPF London Office, the Regional Offices and IPPF offices worldwide, shall comprise the IPPF Secretariat whose Chief Executive Officer shall be the Director-General.

2. It is the responsibility of the Secretariat to interpret and apply in a consistent fashion the policies of the Federation in a manner that is in harmony with Member Association realities and requirements.

3. The Secretariat should contribute to the evolution and initiation of policies for consideration by governing bodies responsible for policy decisions and ensure the involvement of the Members Associations as required in the development of these policies.

4. It is the responsibility of the Secretariat to serve the Member Associations effectively through a rational use of personnel and other resources and to manage IPPF resources effectively in the interests of global sexual and reproductive health including family planning.

As adopted by Central Council, November 1990
As amended by the Board of Trustees, November 2020

Policy 2.2

2.2 TERMS OF REFERENCE OF THE DIRECTOR-GENERAL

1. The Director-General will be the Chief Executive of the Federation and as such shall be responsible for:
    i. ensuring that the operational planning of the activities of the Federation is complete and thorough and in line with the strategic plan and policies approved by the Board of Trustees;
    ii. devising and maintaining appropriate systems and procedures to implement policies approved by the Board of Trustees including an effective and efficient internal control system;
    iii. devising and maintaining appropriate systems and procedures to implement directives, Regulations and Procedural Byelaws recommended to the BoT and approved by the General Assembly;
    iv. the effective and efficient management of IPPF in all respects, particularly in the role of the Federation's financial officer; and informing the Board of Trustees of any executive actions that may have policy implications;
    v. supervising the implementation of the IPPF Unified Secretariat's Annual Programme Budget;
    vi. ensuring that every staff member understands IPPF's role and mission and that each part of the Unified Secretariat has clearly defined objectives and targets;
    vii. devising and maintaining suitable systems and procedures, to:
        (a) mobilise the resources needed for IPPF's programme of work and to provide for its financial sustainability in line with IPPF policy;
        (b) participate in the allocation of resources to the different levels of the Federation in accordance with the financial policies and directions approved by the Board of Trustees; and
        (c) ensure that resources are used effectively and efficiently and that such use is accounted for completely and accurately, in accordance with IPPF policies;
    viii. hiring the most capable staff possible within an acceptable salary range, established staff positions and organisational structures within the Unified Secretariat and
    ix. ensuring that formal appraisals are carried out every year of the Unified Secretariat staff performance in relation to agreed objectives and standards;
2. In carrying out the above responsibilities the Director-General shall:
    i. consult with the Chair and Vice Chair of the Board of Trustees and the IPPF Finance, Audit and Risks Committee Chair as and when necessary or as may be provided for by the Board of Trustees from time to time;

ii. provide the Board of Trustees periodically with timely and complete information about the outcome of approved plans and budgets and on safeguarding issues and updates.

3. The Director-General shall also:

i. provide advice and support to the Board of Trustees generally and to the Chair of the Board of Trustees, Finance, Audit and Risk Committee, Nominations and Governance Committee and other Board's Committees in particular;

ii. maintain appropriate links with international organizations;

iii. maintain effective communications with and between all levels of the Federation.

4. The Director-General shall assist the Board of Trustees and the General Assembly in developing IPPF's strategic plan and in monitoring and reviewing its implementation at regular intervals.

5. The Director-General shall play a leading role in advocacy activities pertinent to the advancement of IPPF's aims and objects.

6. The Director General shall be hired, supported, overseen and evaluated annually and dismissed by the Board of Trustees according to the applicable terms and conditions of employment of the Federation.

7. The Board of Trustees alone shall have the authority to dismiss the Director General by simple majority of the vote.

8. The Director-General will appoint the Regional Directors and Directors, London Office, following a recommendation from a Selection Committee. The Selection Committee shall comprise of the Chair of the Board of Trustees, Vice Chair, and the Director-General, or their nominees.

9. All appointments will be made within the framework of the terms and conditions of employment of the Federation at the time of that appointment. The Director-General will also inform the Chair of the Board of Trustees prior to the renewal or termination of the appointment of such staff.

As adopted by Central Council, November 1990
As amended by Governing Council, May 2020

Policy 2.3

2.3 TERMS OF REFERENCE OF THE REGIONAL DIRECTORS

1. The Regional Director shall be the representative of the Director-General for the Region, and is directly accountable to the Director-General, acting within the

authorities delegated by the Director-General.

2. The Regional Director will:

i. Act as the head of the Regional Secretariat Office and be responsible for the overall leadership and management of the Region.

ii. Establish and Maintain an adequate system of communication and reporting between the Member Associations, collaborative partners and other stakeholders within the region and the Unified Secretariat.

iii. Identify the needs within their Region, identify the resources available both within and outside the Federation for meeting the needs, and where possible develop resources for the purpose.

iv. In line with the IPPF Policy direction, conduct advocacy for an enabling environment for SRHRs for development/review or change of policies in favour of the work of IPPF.

v. Meet with the Director-General, as appropriate, to review the implementation of the regional programme, budget and other work-related issues.

vi. Assist the Director-General to interpret and oversee the implementation of the policies of the Federation, within the context and needs of the Regional custodian of the polices in the region and promote them within the Region, and communicate and interpret the needs of the Member Associations and collaborative Partners so as to contribute to the development of the policies of the Federation and re-definition of its goals.

vii. Assist the Member Associations in the development of programmes for furthering the goals of the Federation.

viii. Provide advice and support to IPPF volunteers within the region as and when required.

ix. Ensure that the Members Associations receive technical support for the implementation of their own programmes or as it is solicited.

x. Be responsible for:

(a) Advising the Director-General and others Directors within the Directors Leadership Team on budgetary requirements, programmes, strategic matters and other organisational issues as appropriate;

(b) Administering the budget for the Regional Offices and for all Regional activities;

(c) Administering the Terms and Conditions of Funding Agreements with Member Associations and Collaborative Partners as appropriate;

(d) Monitoring and Reporting on Member Associations and Collaborative Partners programme/project budgets and the interpretation and analysis of programme and financial reports.

(e) Hiring the most capable staff possible within an acceptable salary range, established staff positions and organisational structures in the Regional Office as approved by Director General.

(f) Ensuring performance appraisals are carried out every year of the Regional Office staff in relation to agreed objectives and standards.

(g) Monitoring and ensuring that Member Associations comply with the Standards and Responsibilities of IPPF Membership.

(h) Advice and recommend to the Director General on matters related to admission, suspension or expulsion of Member Association or Collaborative Partners of the region.

viii. Mobilise additional resources for the Member Associations within the region.

ix. Contribute as a member of the Directors Leadership Team to the implementation of the Strategic Framework in the region and capture / develop innovative practices.

x. Lead and motivate the regional staff and be responsible for the management and development of staff.

xi. In line with the agreed Unified Secretariat strategy and policy, foster information sharing and learning and collaboration to create and strengthen partnership among MAs, Collaborative partners and other stakeholders.

xii. Ensure Regional forums including youth forums are held in line with the Board of Trustees guidelines.

xiii. Share responsibility with Directors Leadership Team for providing leadership to the Unified Secretariat, including the development of staff and for advising the Director-General on the development of policies and management of the Unified Secretariat.

xiv. Maintain and develop relations with other appropriate agencies, both governmental and non-governmental, within the Region in order to facilitate and promote the work of the Federation.

xv. Contribute, as appropriate, to the international role of the Federation and to the implementation of the international programmes of the Federation.

As adopted by Central Council, November 1990
As amended by Governing Council, May 2020

Policy 2.4

2.4 DELEGATION OF RESPONSIBILITIES TO THE DIRECTOR-GENERAL

1. The 1977 Act of the British Parliament which established the International Planned Parenthood Federation as an incorporated body vested certain powers and responsibilities in the IPPF central governing bodies.

2. The Central Council, which shall be known as the Board of Trustees , may delegate to the Director-General acting either alone or in consultation with the Board of Trustees such powers and responsibilities of the Board of Trustees as they may determine from time to time and as is consistent with the letter and spirit of the 1977 Act of Incorporation.

As adopted by Central Council, November 1990

As amended by Governing Council, May 2020

3. FUNDING AND ACCOUNTING

Policy 3.1

3.1 RESOURCE MOBILIZATION

Introduction

1. The ability of the Federation to carry out its programmatic work and thus successfully achieve the IPPF Strategic Framework rests largely on the resources it commands. Sustained investment in resource mobilization at all levels of the Federation is, therefore, a crucial pre-requisite to improving sexual and reproductive rights and health for women, men and young people around the world.

2. The principles, commitments and guidelines for implementing resource mobilization contained within this policy are intended to guide the work of the Federation in their efforts to achieve the Strategic Framework.

Principles

3. Resource mobilization refers to effective planning for fundraising and implementation of strategies in order to attain necessary resources, including human resources. This is closely aligned with advocacy for political commitment to sexual and reproductive health and rights including supplies. All staff and volunteers share this obligation for resource mobilization.

4. Resource mobilization activities undertaken at global, regional and national levels work in synergy to maximize possibilities for renewed and additional financial resources for the entire Federation.

5. The IPPF Secretariat (Central and Regional Offices) and Member Associations have a responsibility to openness, transparency and accountability in their relations with donors and potential donors. Relations with donors at any level add value and goodwill to IPPF's overall relationship with existing and potential donors.

6. IPPF Member Associations will balance their efforts to achieve a diversified sustainable funding base, including user fees, with their commitment to meet the needs of poor and marginalized people.

7. Resource mobilization activities should be devolved to the regional and the country level when and where this is practical.

8. The IPPF Secretariat and Member Associations may seek support from any source, provided that the acceptance of such support does not impose conditions that violate any IPPF policy.

Commitments

9. The IPPF Secretariat and all Member Associations are therefore committed to:

   i. undertaking activities to increase funds available to implement the Strategic Framework;

   ii. achieving a sustainable diversified funding base in alignment with IPPF's mission.

Implementation

The IPPF Secretariat and Member Associations have a number of distinct roles to play to realize these principles and commitments. In order to implement this policy:

10. The IPPF Secretariat and Member Associations will:

   i. invest financial and human resources in resource mobilization activities and ensure that systems and procedures are in place to support this work;

   ii. share pertinent information on the programmatic and geographical priorities of key donors; and

   iii. foster collaborative, mutually respectful partnerships with donors, acknowledging their knowledge and expertise as well as their financial resources.

11. The IPPF Secretariat will:

   i. allocate financial and human resources to generate income from *new* sources of funding on an ongoing basis; and

   ii. inform and, when appropriate, coordinate with relevant Member Associations when undertaking resource mobilization activities with governments in their respective countries.

12. London Office will:

   i. develop and implement a coordinated resource mobilization advocacy and fundraising strategy aimed at increasing funding and diversifying the funding base of the Federation, with the following funding priorities:

      a. to maximize unrestricted grants committed over long periods; and
      b. to secure restricted grants that further the delivery of the Strategic Framework; and

   ii. coordinate the Secretariat's resource mobilization advocacy where the activity involves two or more Regions or where activities target OECD donor countries.

13. Regional Offices will:

   i. develop and implement a coordinated regional resource mobilization advocacy and fundraising strategy;

ii. provide political, management and financial support to Member Associations, with the aim of enabling Member Associations to access and manage funding independently.

14. Member Associations will:

i. develop and implement a coordinated resource mobilization and advocacy strategy that complements the work of the Secretariat as far as possible;

ii. advocate for increased funding for sexual and reproductive health and rights from donors in accordance with the Strategic Framework;

iii. work collaboratively and share lessons learned with other Member Associations to increase capacity and opportunities to raise and manage funding from a variety of sources;

iv. inform and, when appropriate, coordinate with relevant Regional Offices where other Member Associations support international programmes or activities.

As adopted by Central Council, November 1990
Last amended by Governing Council, November 2007

Policy 3.2

3.2 EFFECTIVE FINANCIAL MANAGEMENT AND REPORTING

Introduction

1. As a Federation of not-for-profit organizations funded by governments, multilaterals, foundations and private individuals, the Member Associations and Secretariat of IPPF have an obligation to ensure that financial management and reporting displays the characteristics of transparency, clarity and accuracy. IPPF must ensure that in order to enable the strategic objectives of the organizations to be achieved we must have systems and procedures in place to promote and encourage good financial management and reporting. This policy is to be implemented by the Governing body and Management of Member Associations with the overall intention of maximising the financial resources allocated to service delivery, and advocacy for sexual and reproductive health and rights.

Principles

2. The Member Associations and Secretariat of IPPF are guided by the following principles in terms of good financial management and reporting:
3. Honesty, integrity, probity, transparency and accuracy shall be the hallmarks of financial systems and those that operate them.
4. IPPF has zero tolerance towards fraud of any type or in any circumstances whether carried out by volunteers, staff, contractors, partners or clients.
5. Robust and effective financial systems and procedures must be in place to prevent and detect fraudulent and inappropriate activities which deplete resources and undermine programme delivery.
6. Financial resources should be utilized with consideration of value-for- money and having minimum overheads in order to maximize the use of funds in terms of programmatic inputs. This supports the objectives of the donor community to increase the effectiveness of aid as outlined in the Paris Declaration[1].
7. Accurate, up-to-date and comprehensive financial information is required to ensure that our organizations are well managed and monitored.
8. Donors (including IPPF) should receive timely reports indicating how their resources have been utilized and, that utilization has been in accordance with the funding conditions.
9. Financial reporting systems should promote and facilitate performance measurement, cost effectiveness, efficiency and value for money.

[1] Paris Declaration on Aid Effectiveness, 2 March 2005

Implementation

10. Member Associations and the Secretariat shall ensure that the following are considered and implemented:

Governance

11. The role of the Governing body is key to effective financial oversight within the Member Association. The Governing body have a responsibility to ensure that realistic annual budgets are set for the organization which includes all expenditure commitments and that the income estimates are achievable. The Governing body should meet regularly during the year to review budget performance and where necessary take action to ensure the organization remains financially viable. The Governing body should ensure that resources within the annually approved budget are allocated in order to meet the Strategic Plan of the organization. They should also ensure that the structure of the organization, staffing and allocation of resources is aligned to achieve strategic performance targets and overall effectiveness and efficiency.
12. In order to achieve the role of effective financial oversight the Governing body should have members with appropriate skills and experience in the field of financial management and decision making.

Electronic Integrated Management System (eIMS)

13. The eIMS is the system used by IPPF to enable the reporting of results against the Strategic Framework for the financial resources provided by donors. The Secretariat and grant receiving Member Associations are required to implement the system in order to plan, monitor, evaluate and report against the aims and objectives of the Strategic Framework.
14. Financial Reporting at every level of IPPF must be able to link income and expenditures to the IPPF strategic areas in order to measure and assess financial performance and outcomes.

Staffing

15. The Governing body shall ensure the appointment of an Executive Director who shall then ensure that appropriately qualified staffs are in place to operate financial systems. Finance staff are expected to up-hold the characteristics of honesty, integrity, probity and competency. In order to attract and retain effective financial staff, suitable capacity building and staff development should be undertaken.

Accounting Systems

16. Suitable computerized accounting systems should be in place to ensure that all the transactions of the organization are accurately recorded on a timely basis. The system should be up-to-date and be capable of producing financial statements and regular monthly management reports showing budget and actual performance for

both income and expenditure within three weeks of the month end. The accounting system should be adequately protected to prevent the loss, destruction or alteration of data.

Internal Control Systems

17. Management is expected to develop, implement, monitor and review internal control systems on a continuous basis.
18. On an annual basis the external auditors will supply a Management Letter outlining any issues of concern with the internal control systems. Issues raised will be followed-up and resolved as soon as possible.

Value for Money

19. Goods and services purchased should be undertaken with value for money considerations. The highest possible quality goods and services necessary should be purchased at the lowest possible cost in order to optimize value for money. This is achieved through appropriate tendering, the process for awarding contracts and the subsequent monitoring of such contracts and the supply of goods. This supports the desire of the donor community to increase the effectiveness of aid as outlined in the Paris Declaration.
20. The methods of undertaking purchasing, organizing service delivery and programme implementation should be done in order to optimize the funds available.

Financial Statements

21. On an annual basis grant receiving Member Associations shall prepare for IPPF and other donors' financial statements in accordance with internationally accepted accounting standards. These statements shall include all sources of income not just IPPF funding (including donated items such as commodities). These statements shall be audited by reputable auditing firms. For this purpose, the Secretariat will issue annually an approved list of international auditing firms which are recommended for use.
22. The financial year to be followed is 1 January to 31 December.
23. Audited financial statements should be approved by the Governing body of the organization on a timely basis and within five months of the year end at the latest. The Governing body should also ensure that the Management responses to the Management Letter are appropriate and that recommendations will be implemented in a timely and effective manner. The Management Letter shall be submitted to IPPF together with the audited financial statements.

Donor Reporting

24. Where donor funds are received for restricted purposes the accounting system and internal controls must be capable of ensuring that the income and expenditure is correctly identified. Items of expenditure cannot be charged to more than one donor.

Where items of expenditure are charged against donor funds these must be in line with any of the donor's funding requirements and / or the donor grant agreement.

25. Donor reporting must be undertaken on a timely and accurate basis ensuring that the reported figures agree to the underlying accounting records.

Budgeting

26. Comprehensive and timely budgeting should be undertaken in order to plan the allocation of resources and ensure that suitable funding is in place to meet expenditure requirements. Budgeting should be based on accurate cost information and cover all the expense items of the organization. Annual budgets should be in place in advance of the start of the year to allow effective implementation of programme activities. Longer term budgeting should also be undertaken as part of the strategic planning process with indications provided of long-term sustainability in terms of local income, donor diversification and other income generating initiatives.

Overheads

27. Overheads are defined as indirect costs which cannot be attributed to a particular programme project and include the salaries and other costs of ***the following departments*****:** finance, human resources, information technology and office facilities. All organizations require overheads to ensure that their programme delivery is provided with adequate support from finance, human resources, office support and information technology. IPPF believe these need to be in place to ensure well managed organizations but at a level which demonstrates value for money. No more than 20 per cent of an organization's overall annual budget (all donor income, local raised income, clinical service fees etc.) should be allocated to such overhead costs. Where the percentage is higher, the Governing body will need to justify this to IPPF and demonstrate that plans are in place to meet this target in future years through cost reductions and/or income increases. ***Generally accepted targets for overhead costs are between 10 and 15% of total budget and organizations should strive towards these targets.***

Commodities

28. Suitable stock management systems should be in place to ensure that stock movements are correctly recorded and that an effective stock management system can be implemented to prevent stock wastage. The stock management system and the financial system recording stock values should reconcile.

Investments

29. Member Associations should have a clear policy in place outlining the investment of surplus cash. This policy should be risk based ensuring maximization of returns at an acceptable level of risk.

Reserves

30. Adequate general reserves are required in order to maintain a healthy financial situation and in particular the cash flow of the organization. Associations should plan their overall budgets in line with their expected levels of reserves. A general reserve in excess of three months unrestricted annual budget will need to be justified by the Governing body. Associations can utilize excess general reserve to establish a foreign currency reserve where this is required to provide protection against fluctuating donor receipts.

31. On an annual basis the Secretariat shall review the working capital (excess of current assets over current liabilities) of the Association and the rate of exchange at which it has received funding remittances. Where the Association is found to have excess working capital then the level of the funding provided may be adjusted depending upon the level of unrestricted reserves held.

Endowment / Capital or Trust Funds

32. Where capital is retained and invested for the purpose of generating income to be used for the activities of an Association this is referred to as endowment / capital or trust funds. Such funds are created by the Governing body of the organization. The capital to create such funds can often arise from large bequests or legacies being received, surplus unrestricted reserves identified or a donor provides funding specifically to allow this. The aim is to create a long term and regular method of generating an income flow from investing such a fund. In establishing such funds, the Association should ensure that an investment strategy is in place to maximize the returns against the level of risk which is deemed to be acceptable. As the decision to create such a fund will lead to short term service delivery not being expanded, consideration must also be given to any impact on future fundraising efforts from maintaining such funds.

Exchange Rates

33. The reporting currency of IPPF is United States Dollars.

34. IPPF will provide core funding based in the local currency of the Member Association. The U.S. dollar conversion amount will also be quoted, but this will be based on the exchange rate in effect on the specific day the grant is settled. The grant remittance itself will be paid in US dollars and the total dollar amount paid in a particular grant year will equal the agreed local currency funding amount when converted using quoted rates (OANDA or similar).

35. In certain extraordinary circumstances, for example hyperinflation, the payment of grants in local currency will result in Member Associations being unable to complete agreed activity. In these circumstances grants will be made in US dollars up to the amount of the original dollar conversion referenced in point 35.

36. IPPF funding shall be transferred through recognized banking channels and will not be used to circumvent local exchange regulations.

As adopted by Governing Council in May 2008
As amended in November 2010

Policy 3.3

3.3 ALLOCATION OF RESOURCES

1. Criteria which govern the allocation of IPPF resources take account of the cultural, social and religious difficulties facing individual Member Associations in addition to the economic problems in each country.
2. The following seven principles apply to the allocation of resources:
    i. IPPF support is only given to programmes respecting the right of parents freely and responsibly to plan the number and spacing of their children.
    ii. IPPF gives preference to programmes which have a direct and demonstrable benefit to the welfare of individuals and families.
    iii. IPPF, where appropriate, supports programmes designed to demonstrate that large scale family planning programmes are feasible and may undertake support of programmes designed to provide the major proportion of national family planning services.
    iv. IPPF support is given to develop acceptance of family planning in the expectation that local resources will increasingly be devoted to family planning.
    v. IPPF gives preference to programmes which are innovative in nature, demonstrate high quality, or provide services in a simple, safe and effective manner.
    vi. IPPF gives preference to programmes which are based on volunteer effort and broad community participation.
    vii. IPPF takes into account the unmet needs and the social and economic setting within recipient countries.
3. On the approval of the Director-General, Regions and Member Associations may reallocate unspent funds from one budget item to another.
4. Funding Family Planning Through Other Organisations:
    i. IPPF allocates its funds on the basis of quality and effectiveness of programmes in meeting family planning needs. No Member Association should regard itself as the sole means by which IPPF funds shall be channelled to meet the family planning needs of the people.
    ii. IPPF may provide funds to other organisations on the basis of the following guidelines and in accordance with procedures determined by the Board of Trustees from time to time.
    iii. In allocating funds to other organisations IPPF will seek where appropriate to:
        (a) complement and extend family planning efforts;
        (b) form partnerships with Member Associations in extending family planning work;

(c) provide alternative channels for the delivery of family planning education, information and services.

iv. Each member must make best use of available resources to implement its own priorities and strategies within the overall policies and strategic directions of the Federation. Each member should seek to build partnerships with the Government, other international agencies and local NGOs working in related areas. Such partnerships will increase the influence and prestige of the Association and enable it to access additional resources from new and existing donors.

As adopted by Central Council, November 1990
Last amended by Governing Council, November 2000

Policy 3.4

3.4 PURCHASE OF MEDICAL PRODUCTS, INCLUDING CONTRACEPTIVES, CONDOMS, REPRODUCTIVE HEALTH MEDICINES, DEVICES AND DIAGNOSTICS

Introduction

1. IPPF's purchasing policy and operational guidelines reflect the need to ensure that contraceptives and other medical products[1] meet adequate levels of quality and that adequate insurance arrangements are in place to protect against the risk of poor product supply.

2. This policy outlines the minimum requirements to ensure that medical products procured and supplied meet international quality standards, are sourced and procured only at duly vetted suppliers and that products are properly insured during all steps of the supply chain process.

Product Quality:

3. All medical products that IPPF procures must be authorized by the relevant authority in the country of use, following national standard practices for registration or other legal forms of authorization, such as import exemptions and/or authorizations for special use.

4. Finished Pharmaceutical Products (FPP), including contraceptives and reproductive health medicines, when procured, must meet at least one of the following Quality Assurance criteria:

    1. the FPP is Prequalified by the WHO Prequalification Programme: https://extranet.who.int/prequal/medicines/prequalified/finished-pharmaceutical-products.

    2. the FPP is authorized for use by a regulatory authority that is designated as a WHO-Listed Authority (WLA) or graded at Maturity Level 4 (ML4) under the WHO Global Benchmarking Tool (GBT) framework: https://www.who.int/publications/m/item/list-of-who-listed-authorities-wlas & https://www.who.int/publications/m/item/list-of-nras-operating-at-ml3-and-ml4
        i. Austria – Austrian Federal Office for Safety in Health Care (BASG)
        ii. Belgium – Federal Agency for Medicines and Health Products (FAMHP)
        iii. Bulgaria – Bulgarian Drug Agency (BDA)
        iv. Croatia – Agency for Medicinal Products and Medical Devices (HALMED)
        v. Cyprus – Pharmaceutical Services, Ministry of Health (PHS-MoH)
        vi. Czechia – State Institute for Drug Control (SÚKL)
        vii. Denmark – Danish Medicines Agency (DKMA)
        viii. Estonia – State Agency of Medicines (SAM)
        ix. Finland – Finnish Medicines Agency (FIMEA)

[1] Within this policy, the use of term "product" includes to the extent applicable, drugs, devices and diagnostics

x. France – National Agency for the Safety of Medicines and Health Products (ANSM)
xi. Germany – Federal Institute for Drugs and Medical Devices (BfArM) and Paul-Ehrlich-Institut (PEI)
xii. Greece – National Organization for Medicines (EOF)
xiii. Hungary – National Institute of Pharmacy and Nutrition (NNGYK)
xiv. Iceland – Icelandic Medicines Agency (IMA)
xv. Ireland – Health Products Regulatory Authority (HPRA)
xvi. Italy – Italian Medicines Agency (AIFA)
xvii. Latvia – State Agency of Medicines (ZVA)
xviii. Liechtenstein – Office of Health / Medicinal Products Control Agency (LLV)
xix. Lithuania – State Medicines Control Agency (VVKT)
xx. Luxembourg – Ministry of Health (MoH)
xxi. Malta – Malta Medicines Authority (MMA)
xxii. Netherlands – Medicines Evaluation Board (CBG-MEB)
xxiii. Norway – Norwegian Medicines Agency (NOMA)
xxiv. Poland – Office for Registration of Medicinal Products, Medical Devices and Biocidal Products (URPL)
xxv. Portugal – National Authority of Medicines and Health Products (INFARMED)
xxvi. Romania – National Agency for Medicines and Medical Devices of Romania (NAMMDR)
xxvii. Slovakia – State Institute for Drug Control (SÚKL)
xxviii. Slovenia – Agency for Medicinal Products and Medical Devices of the Republic of Slovenia (JAZMP)
xxix. Spain – Spanish Agency of Medicines and Medical Devices (AEMPS)
xxx. Sweden – Medical Products Agency (MPA)
xxxi. Switzerland – Swissmedic
xxxii. United States – Food and Drug Administration (FDA)
xxxiii. Republic of Korea – Ministry of Food and Drug Safety (MFDS)

Singapore – Health Sciences Authority (HSA)

3. the FPP is authorized for use by a regulatory authority which has not yet been validated by WHO in its Listed Authority process, but which was a member and/or observer of ICH prior to 23 October 2015:
   i. Canada – Health Canada (HC)
   ii. Brazil – Agência Nacional de Vigilância Sanitária (ANVISA)
   iii. Taiwan – Taiwan Food and Drug Administration (TFDA)
   iv. United Kingdom – Medicines and Healthcare products Regulatory Agency (MHRA)
   v. Australia – Therapeutic Goods Administration, Department of Health and Aged Care (TGA)
   vi.
4. the FPP has been reviewed and recommended for use by the Expert Review Panel (ERP) for a limited time (up to 12 months) pending WHO prequalification or WLA approval: https://extranet.who.int/prequal/medicines/expert-review-panel
5. the FPP is procured from internationally certified wholesalers, audited and approved under the USAID Global Health Supply Chain Program: https://www.ghsupplychain.org/for-suppliers/ghsc-eligible-lists
   i. Action Medeor, Germany www.medeor.de/en/
   ii. Amex Healthcare, Austria https://amex-healthcare.com/home/
   iii. IDA Foundation, Netherlands www.idafoundation.org
   iv. Imres, Netherlands https://www.imres.nl/en
   v. Medical Export Group (MEG), Netherlands www.meg.nl
   vi. Missionpharma, Denmark www.missionpharma.com
   vii. UNIMED, UK www.unimedps.com/about-us

6. the FPP is procured from Humanitarian Procurement Centres (HPCs) recognized by the Directorate-General for European Civil Protection and Humanitarian Aid Operations (DG ECHO): https://www.dgecho-partners-helpdesk.eu/ngo/actions-implementation/procurement/humanitarian-procurement-centres-hpcs
    i. Asrames, DR Congo www.asrames.org
    ii. CHMP, Kenya www.chmp-kenya.org
    iii. Farmaceuticos Mundi, Spain www.farmamundi.org
    iv. Red Cross & Red Crescent, Switzerland http://procurement.ifrc.org
    v. MEDS, Kenya www.meds.or.ke
    vi. MSF, France www.msflogistique.org / www.msfsupply.be
    vii. Oxfam, UK https://www.oxfam.org.uk MEDS, Kenya www.meds.or.ke
    viii. WFP/UNHRD, Italy www.unhrd.org
    ix. UNICEF, Denmark www.unicef.org/supply
    x. UNOPS, Switzerland https://www.unops.org/expertise/procurement

Contraceptives that are not finished pharmaceutical products, such as e.g. male condoms, female condoms and IUDs follow the same approval standards as listed above.

5. Quality standards – Medical Devices:

IPPF recognizes and subscribes to the definition and standards of medical devices as defined by the WHO working in conjunction with the International Medical Devices Regulatory Forum (IMDRF) formally the Global Harmonization Task Force (GHTF)[2].

IPPF requires that all medical devices procured and distributed meet the essential requirements as set out in the EEC Directive: Council Directive 93/42/EEC, 90/385/EEC and 98/79/EEC and preferably are certified with the CE Mark. If the product is not CE-marked, then IPPF will purchase products that are recognized by at least one of the following regulatory authorities or an equivalent entity:

- MPALS License (Australia)
- Device License (Canada)
- Device License (Japan)
- 510 k Device Letter (USA); and

Priority shall be given to candidates that have been accredited by a recognised accreditation entity, thus providing proof of compliance with at least one of the following standards or equivalent:

- Japan QS Standard for medical devices 1128
- ISO 13485 on quality management system of an organization
- ISO 9002/1994 on quality assurance in production, installation and servicing

6. Quality standards – Diagnostic tests:

IPPF subscribes to the WHO pre-qualification scheme for diagnostics tests. Where possible IPPF will procure tests from the list of prequalified products listed on the WHO list of prequalified in-vitro diagnostic products.[3]

Where tests are required that are not on the WHO pre-qualification list including rapid in vitro diagnostic pregnancy test kits, IPPF will seek products that are CE Marked or

[2] WHO guideline – Medical Devices Technical Series, a global overview to guiding principles - https://www.who.int/teams/health-product-policy-and-standards/assistive-and-medical-technology/medical-devices

[3] WHO list of prequalified in-vitro diagnostic products - https://extranet.who.int/prequal/vitro-diagnostics/prequalified-vitro-diagnostics

have equivalent certification or licensing from authorities by at least one of the regulatory authorities or an equivalent entity:

- MPALS License (Australia)
- Device License (Canada)
- Device License (Japan)
- 510 k Device Letter (USA);

Additional guidance on rapid in vitro diagnostic pregnancy tests can be found in the most recent version of the Reproductive Health Supplies Coalition (RHSC)'s Quality and Performance Guidance for Selection of Pregnancy Tests for Procurement.[4]

Priority shall be given to candidates that have been accredited by a recognised accreditation entity, thus providing proof of compliance with at least one of the following standards or equivalent:

- Japan QS Standard for medical devices 1128
- ISO 13485 on quality management system of an organization
- ISO 9002/1994 on quality assurance in production, installation and servicing

[4] RHSC Quality and Performance Guidance for Selection of Pregnancy Tests for Procurement - https://www.rhsupplies.org/uploads/tx_rhscpublications/Quality_and_Performance_Guidance_for_Selection_of_Pregnancy_Tests_for_Procurement_May_2017.pdf

Product Insurance:

7. Products supplied by IPPF and its Member Associations need to be covered by appropriate (product liability) insurance. Such liabilities can arise at any point in the supply chain and are broadly divided into the following three areas:

Area of Responsibility	**Liability**
Product manufacture and supply	Manufacturer's Liability
Product delivery to Member Association	Procurement Agent's Liability
Product receipt storage and use with clients	Member Association's Liability

8. IPPF acts as the liaison between Procurement Agent and Member Associations when procuring products on MA behalf, and ensures to have insurance in place to cover for any damages that occur to the products as long as the products are in IPPF ownership during transport, in transit or in storage per the ICC INCO terms 2020.

9. Estimated values of insured voyages and the relevant terms and conditions are to be reviewed and contracted on an annual basis. For voyages to excluded territories, insurance will be agreed on a case-by-case basis.

10. IPPF will validate and keep record of manufacturers having product liability insurance to cover manufacture and supply (i.e. quality and safety of the product). Where product liability coverage does not exist or where the amount of coverage is low, IPPF or its contracted external procurement agency will confirm the necessity to establish its own product liability coverage to be protected against claims, justified or unjustified, and their related costs.

11. IPPF will notify any manufacturer immediately in case it receives any third-party claims and liability for damages, losses or costs resulting from or caused by the product, so that the manufacturer can take necessary steps for the protection of its interest. IPPF will provide manufacturers with reasonable evidence that such damages, losses or costs were caused by defective product.

12. Where locally feasible, Member Associations supplying health products must ensure that adequate product liability insurance cover (manufacturer's / procurement agent's and Member Association's liabilities) is in place in order to indemnify against claims and their related costs, minimize risk and safeguard the reputation of the Federation.

Supplier Due Diligence:

IPPF is wholly committed to not fund or receive funds from terrorist individuals or organisations and has introduced and embedded actions into policy and practice to ensure that necessary steps are taken to prevent any engagement with terrorism. IPPF is also taking these steps to ensure that it is fully compliant with banking regulations and donor compliance requirements, to limit the risk of the occurrence of illegal financial transactions such as fraud and bribery.

13. IPPF will follow a 2-step due diligence vetting of all suppliers it intends to engage with. No Purchase Order can be released until the due diligence process of a supplier has been successfully executed.

14. Prior to the release of any Purchase Order, IPPF will require the supplier to confirm it has in place documented policies or evidence of internal procedures to the following matters:

    - Value for Money and Governance
    - Ethical Behaviour
    - Transparency and Delivery Chain Management
    - Environmental Issues
    - Terrorism and Security
    - Safeguarding, Social Responsibility and Human Rights

    IPPF will also review and confirm the economic standing of its potential suppliers by requesting and analysing all financial updates and corporate accounts of the last 2 years and by confirming tax compliance per the applicable country's regulations.

15. In step 2 of its due diligence vetting prior to order release, IPPF commits to carry out searches for all IPPF Purchase Orders (including existing and potential suppliers), new and existing IPPF Secretariat staff (under the pre-employment referencing process), partners/donors and Member Associations, against the external databases consolidated in Accuity prior to order release.

    Accuity's databases list individuals and organisations excluded from doing business with (both national or international organisations) due to violations of regulations for involvement with terrorism, illegal financial transactions or any other criminal records. Should any evidence of links with terrorist activity be found within our procurement, funding streams, staff or MAs, appropriate corrective action will be taken in compliance with local legislation. IPPF recognizes that, as per the international legal obligations of states, such legislation should comply with international law, in particular international human rights law. Please refer to the IPPF Fraud Policy Implementation section for further guidance on appropriate response protocol.

Policy Implementation:

To implement this policy:

16. Member Associations supplying medical products must have in place documented policies, procedures and controls to ensure that all supplies meet the requirements of the procurement policy. These should cover both purchases made by the Member Association as well as donated items received from donors and third parties that are distributed by the Member Association.

17. Member Associations should review and document on a regular basis their insurance coverage and recall policy and procedures to ensure that it meets with best practice in relation to product liability risks. Where products are supplied through the Secretariat, Member Associations must ensure they have '*product receipt storage and use with clients*' cover in place. Where Member Associations obtain products that have not been supplied through the Secretariat, they must ensure that liability insurance covers: '*product manufacturer and supply*', '*product delivery*' as well as '*product receipt, storage and use with clients*' where locally feasible.

18. Where donated products are supplied to the Federation for disbursement, the Secretariat will ensure that internal processes for accepting these donated items meet the requirements of this policy and are documented.

19. Products received by Member Associations as a donation from the national government will be registered and approved for use in that country by that government and may therefore be accepted. This would also apply to products made available at subsidized price by governments. Products received by the Secretariat and Member Associations as a donation from another third party must meet the requirements stated above in Product Quality, Product Insurance and Supplier Due Diligence.

20. The Secretariat will provide commodity procurement advice and guidance on matters in relation to the procurement policy to Member Associations in order that they can purchase products that meet recognized quality standards but at the same time benefit from the reduced costs as a result of the generics marketplace.

21. IPPF, third party distribution agents and Member Associations must have clear processes that will provide rapid response to drug recalls and other safety concerns and will provide information to those impacted by recalls deemed to have serious safety concerns, or market withdrawal of drugs for safety reasons.

22. IPPF Secretariat will use all available mechanisms in the Federation to periodically and consistently monitor implementation and review the policy statement. The implementation of this statement should be adequately resourced and supported by the Secretariat.

As adopted by Governing Council, November 2007
As amended by Board of Trustees, October 2025

Policy 3.5

3.5 AFFILITATE LOAN POLICY

1. Introduction

As donor funding continues to decline, ensuring the long-term viability of our affiliates (Member Associations (MAs) and Collaborative Partners (CPs) in line to become MAs) and their capacity to deliver essential programmes/services has become increasingly important.

In response, and in keeping with IPPF's strategic goals, the Director General established the **MA Commercial Sustainability Department** in June 2024. Under leadership of the Director General, this department is tasked with supporting income-generating activities within IPPF affiliates to be run with a commercially sound approach. The goal is to generate sustainable revenue streams that can over a period cover operational costs and reduce reliance on donor funding.

To advance this objective, the **affiliate loan policy will enable the Director General to establish loans** to IPPF Affiliates **for commercially viable initiatives** developed under the guidance of the Secretariat. These loans are intended to catalyse opportunities that enhance the financial sustainability and service delivery capacity of MAs across the Federation.

2. Purpose and Scope

The purpose of this policy is to outline the principles governing the provision of loans to IPPF Affiliates.

This policy governs all loan arrangements made with MAs or Collaborative CPs who are in the process of becoming MAs.

This policy does not apply to any advances, grants and non-repayable financial assistance provided by IPPF.

3. Definitions

a) **Loan:** A sum of money provided on the condition that it is repaid, typically with interest, to support income-generating or financial sustainability activities initiatives to the eligible MAs/ CPs. Loans are to be provided in line with the UK Charity Commission guidelines as stated below:
   i) a loan made to another charity for charitable purposes only.
   ii) a loan to a beneficiary of the charity, and made in the course of carrying out the purposes of the charity.
   iii) money placed in a current account at a bank.
   iv) any other loan made for the benefit of the charity, and not for the avoidance of tax (whether by the charity or another person)

b) **Member Association (MA):**
   i) **Full Member:** A full member association is an organisation that freely joined IPPF and subscribes to IPPF vision, Mission and values and uphold the membership standards through on-going compliance.

ii) **Associate Member:** An associate member is an organisation that freely joined IPPF and subscribes to IPPF vision, mission and values and uphold an on-going compliance with the five criteria of admission as outlined in IPPF responsibilities and standards of membership.

c) **Collaborative Partner:** A collaborative partner is recognized within the broader IPPF affiliation model. It has clear commitments to the Federation that are long term and strategic. However, a CP holds no voting rights and has reduced access to shared resources and opportunities. It does not meet the full set of criteria for membership. Importantly, being a CP can be considered a significant step on the pathway to membership.

d) **Advances:** are short-term bridges or stopgap funds, often repaid quickly or adjusted from future earnings within the year in which the amount is advanced. These do not carry any additional payment requirement, such as interest on the principal.

e) **Grants:** are non-repayable financial awards (subject to meeting all the requirements of the agreement) to support a specific cause or undertake a set of specific activities, given by a government, foundation, corporation, or other entity to support a specific charitable purpose like providing family planning services, advocacy, research, business development, or community projects, etc. Also grants usually do not even carry any interest repayment requirements.

4. Policy

IPPF may provide loans to MAs and/ or to CPs (on the way to becoming a MA).

Such loans are intended to support income-generating activities that fully align with IPPF's mission and contribute to the financial sustainability of the applicant.

Loans will be approved only for specific, time-bound initiatives that demonstrate clear potential for profit and repayment.

5. Guiding Principles

Loans shall be considered only for sustainability and fund-raising initiatives, including individual giving programmes.

The guiding principles that IPPF will use when issuing a loan to one of its affiliates will include:

a) Loans will be provided only for initiatives that support financial sustainability and reduced dependency on grants.
b) Loans must be tied to clearly defined financial sustainability initiatives such as revenue-generating activities, cost-reduction measures, social enterprise ventures, or infrastructure that support operational self-reliance.
c) Loans will be provided only if the initiative is in alignment with IPPF's mission and strategic goals.
d) Loans will be provided only if there is a written agreement that includes:
    i) Clear terms for monitoring, including agreed-upon performance indicator;
    ii) Commitment to share data with IPPF in a transparent and timely manner;
    iii) Terms to ensure accountability for use of financial resources for the purpose provided, and

iv) Commitment to repay the principal and interest thereon as per clearly stated terms.

e) Loans will be provided only if IPPF has undertaken adequate risk assessment and financial due diligence process. This will include financial analysis, risk evaluation, operational capacity, governance structures, and a review of the project's feasibility and sustainability plan.

6. Implementation

a) Loans shall be approved only if they are:
   i) For sustainability/ fund raising initiatives.
   ii) Supported by a clear business case, including projected income, repayment plan, and risk assessment;
   iii) Within the overall limit of loans recommended and approved as part of the 'sustainability programme budget' by the Board of Trustees;
   iv) Have the engagement of the Regional Offices in supporting the MA sustainability programme and oversight of the loan repayment;
   v) Approved by the Director-General and by the Chair of the Finance, Audit and Risk Committee.

b) All loans shall be backed by terms and conditions that are documented and agreed in writing by IPPF and the recipient Affiliate and at the minimum must:
   i) Be signed off by the Director-General and by the Chair of the Finance, Audit and Risk Committee (C/FAR);
   ii) Contain clear repayment terms;
   iii) Carry a commercial rate of interest;
   iv) Have repayment terms that are adequately secured, with a proper lien or other acceptable forms of security. At the minimum, this would include be a lien on core grants payable to the Affiliate by IPPF and any income generated from services/ programmes delivered;
   v) Document the shared understanding that repayment of the loan may not only be recovered from unrestricted core grants but from any other reimbursements payable to the Affiliates but make clear that repayments of loans shall <u>not</u> be recovered from restricted project grants;
   vi) Clearly defined the roles of Regional Offices in supporting the Affiliate's sustainability programme and in oversight of loan recovery.

c) The Secretariat/MA commercial sustainability department shall monitor and report progress against each loan on a regular basis (once every quarter), i.e. to the Directors Leadership Team (DLT), and the Resource Allocation and Sustainability Technical Committee (RASTC) and C/FAR.

d) IPPF shall reserve the right to review loan performance and if required adjust its terms and conditions, including calling back the loan earlier than originally agreed.

e) Changes in lending terms will only be applicable if agreed to by all parties in writing.

f) Any loan recovery action will be undertaken with due regard to the Affiliate's continued operational viability. Recovery action could include:
   i) Pursuing legal remedies in accordance with applicable laws and contractual provisions;
   ii) Executing security arrangements or liens that in place;
   iii) Offsetting the outstanding loan against any future disbursements to the Affiliate;
   iv) Undertaking any other proceedings available for recovery from the defaulting Affiliate.

g) This policy will be reviewed in 24 months after issuance of the 1st loan, when the policy would come back to the Board of Trustees, for amendment/ renewal.

Version Control

Effective Date	Review Date	Owner	Approved Date
On the date of approval by the Board of Trustees	August 2025	Chief Commercial officer	November 2025

Annex 1 - Interpretation of 'for the benefit of the charity'

1. There are limited ways in which charities may apply their funds. Broadly they may either apply them in carrying out their charitable objects or they may invest their funds to generate income to fund their charitable activities. So, loans made by charities may be made for the:
   - Financial benefit of the charity, to generate income or gains to enable the charity to carry out its objects;
   - Charitable benefit of the charity — carrying out its charitable objects.

   HM Revenues and Customs (HMRC) has long held the view that an investment or loan must be either for financial benefit or for charitable benefit. However, HMRC increasingly recognise that charity trustees need greater flexibility in making decisions and a rigid distinction is no longer necessarily appropriate.

2. HMRC accepts that in considering whether an investment or loan has been made for the benefit of the charity a broad view should be taken of how the charity benefits. This does not mean that 'anything goes'. Trustees must be able to justify their investment and loan making decisions and demonstrate how the loan benefits the charity. HMRC may ask to see evidence of the trustees' decision-making process and the information considered as part of that process.

3. A loan will normally be made to generate a flow of income or capital appreciation to enable the charity to deliver its charitable objectives. Where this is the case 'for the benefit of the charity' is most likely to mean for the financial benefit of the charity. In this sort of case HMRC would expect to see evidence of trustees having made a properly considered decision. This would include taking properly qualified, and preferably independent, advice as necessary, the seeking of a commercial rate of return in relation to risk, taking reasonable steps to limit the charity's overall exposure to risk including securing loans where possible, and consideration of available alternatives.

4. There's no one test of commercial soundness and each case must be viewed on its own facts. Where the loan is an investment loan, HMRC will normally accept it's for the financial benefit of the charity where it:
   - Carries a commercial rate of interest which is paid and actively pursued;
   - Be adequately secured, preferably through a proper lien or other acceptable form of security, at the minimum through a lien on core grants payable to the affiliate by IPPF;
   - Not be repaid from core grants, restricted funds, or designated project grants;
   - Is made under a formal written agreement which includes reasonable repayment terms;
   - In considering the individual elements above HMRC will look at the arrangement in the round. For example, does the rate of return reasonably reflect the security and repayment terms? Have the trustees made proper enquiries into the credit

worthiness of the borrower and do the terms reflect that? Have the agreed terms of the loan been applied in practice?

5. As noted above, HMRC will take a broad view of how an investment benefits a charity. For example, a commercial investment might yield a highly advantageous return for the charity but be so contrary to the charity's objects that it cannot be properly considered to be for the benefit of the charity. Conversely, an investment may yield a relatively modest rate of return but may help directly carry out the charity's objects. In such a case the trustees may be able to demonstrate that overall, there is an acceptable level of benefit to the charity for the amount invested.

6. A loan not made as an investment does not need to provide a financial benefit and would normally only be 'for the benefit of the charity' if it's made for the charitable benefit of the charity. HMRC would expect to see evidence that the trustees had given proper consideration to how the loan would carry out the charity's objects. This would include taking account of the balance between public benefit and any private benefit to the recipient of the loan. However, a broad assessment has to be made of the benefit provided by such a loan and if it provides some financial return this should be taken into account. Section 514(3)(d) CTA 2010 and section 561(3)(d) ITA 2007 apply only to loans not made as investments.

7. Guidance published by The Charity Commission for England and Wales identifies a distinction between 'Financials' and 'Socials'.

8. Investments recognised by the Charity Commission as financial investments should be in the strict sense — funds invested to generate a flow of income or gains to enable the charity to carry out its objects. Where an investment is a financial investment, HMRC would expect trustees to be able to demonstrate that the investment was made for the financial benefit of the charity.

9. The Charity Commission guidance recognises that a charity can take an ethical approach to its financial investments.

As adopted by Governing Council, November 1999
Last amended by the Board of Trustees November 2025

Policy 3.6

3.6 EMERGENCY FINANCIAL SUPPORT FOR PEOPLES IN COUNTRIES FACING DISASTERS

Introduction

1. As a Federation working in more than 150 countries, IPPF and the communities living in areas where we provide sexual and reproductive health and rights, are affected by the impact of disasters resulting from natural forces (i.e. droughts, floods, famines, hurricanes) or man-made situations (i.e. civil strife and economic crises).
2. This policy provides guidance as to where additional emergency financial support funding can be provided and the process through which it is approved by the organization.

Principles

3. IPPF is not a Disaster Relief organization and is not in a position to respond to the needs arising from disaster situations. It does however recognize that as a result of such disasters, serious humanitarian assistance can be required in order to meet the sexual and reproductive health and rights (SRH&R) needs of the suffering populations.
4. IPPF also recognize that such disasters can put short term pressure on a Member Association to continue their services, due to damage to key facilities, equipment etc.
5. In granting funds for emergency support, we aim to ensure that normal services can be restored as soon as possible and / or that the immediate SRH&R needs of the suffering populations can be met.
6. Funding can only be granted to organizations who are members of IPPF.

Emergency Support Funding

7. The Board of Trustees shall aim to set aside an adequate fund each year within the Programme Budget for an Emergency Support Fund.
8. The fund shall be administered by the Director-General who will make decisions on the funding to be provided.
9. The maximum amount which any organization can receive in any one year is US$50,000.
10. Member Associations will apply for funding through the Regional Director within four weeks of the situation occurring. The application should state the background to the emergency situation and how this has affected the Association, the expected outcomes and a detailed budget as to how the funding will be utilized.

Purpose of Funding

11. Funding is provided to meet additional costs arising from a disaster. It is not a means of providing recurring costs normally included within the Programme Budget of the Association.
12. Funding must be linked to the SRH&R needs of the population. Whilst providing an integrated response can sometimes involve provision of shelter, food and other basic needs there must be a clear element and linkage to SRH&R, for example providing support to pregnant women.
13. Funding can be used for repairs and replacement to property and equipment of the Member Association which have been destroyed as a result of a disaster.

Reporting

14. All Member Associations receiving funding from the Emergency Support Fund should provide the Regional Office, within six months of receiving the funds, a detailed breakdown of how the funds were spent and the specific outcomes.

As adopted by Governing Council, November 1999
Last amended by Governing Council, November 2007

Policy 3.7

3.7 PRIVATE SECTOR PARTNERSHIPS

Introduction

1. IPPF is committed to developing strong, mutually beneficial private sector partnerships in pursuit of advancing global sexual and reproductive health and rights. In developing strategic alliances with private sector partners, IPPF aims to increase its capacity for greater visibility, impact and to diversify income streams.
2. This policy recognises the need to guide and outline best practise when developing new partnerships to ensure that core values are aligned between all parties and that there is a shared commitment to SRHR.

Definition of Partnership

3. **Partnership**
   i. Partnership can be defined as a collaborative relationship between two or more parties based on transparency, equality, and mutual understanding for the achievement of a specified goal. Partnerships involve sharing risks, resources, and benefits, making shared accountability critical.[1]

Types of Partnership:

4. Partnerships can take many forms including:
   i. **Strategic Partnerships**: Working together across organizations or sectors and collaborating with a range of partners for improvements or better outcomes.
   ii. **Funding Partnerships** including sponsorship, gifts in kind, donations.
   iii. **Service Delivery or Project Partnerships**: Working together with external partners to deliver projects or programmes in order to achieve common aims and objectives.
   iv. **Learning Partnerships or Collaboration** which could include training, skills sharing and the development of tools or guidance.

Guiding Principles

5. The Member Associations and Secretariat of IPPF are guided by the following principles when partnering with external organizations:
   i. Partners should be aware of the vision, mission and values of IPPF and be supportive of these.
   ii. IPPF is in support of and is signed up to the Guiding Principles of the UN Global Compact. Please refer to Annex A point one for further information.

[1] 'Building a working definition of Partnership.' WHO 2009

IPPF will endeavour to uphold the principles of the UN Global Compact in its Private Sector Partnerships.

iii. IPPF is committed to working with potential partners who want to further the work of IPPF through whichever benefit they are able to provide including funds, skills sharing, sponsorship and learning.

iv. IPPF is committed to ensuring that accountability in partnership work is maintained with clear and transparent roles and responsibilities outlined and agreed in writing before any partnerships are entered into. Please refer to IPPF Policy 3.10 on 'Transparency' for further guidance.

Policy:

6. This policy applies to private sector engagement for monetary and non-monetary partnerships.

7. When considering or developing new external partnerships or reviewing existing partnerships, the following steps should be taken:

   i. Research potential partners including consideration of any conflict of interest.

   ii. Assess Risk involved, potential value and the ability of IPPF to deliver including the resource impact and all costs and benefits involved in the partnership. Please refer to Annex B the Private Sector Process Flow Diagram for further guidance.

   iii. Consult and involve stakeholders.

   iv. Develop jointly a partnership structure, aims and objectives, accountability including roles and responsibilities, processes, reporting arrangements and an exit strategy.[2]

   v. Determine who will be responsible for developing and embedding the partnership/relationship in each organization.

   vi. Set up a steering group[3] where appropriate with named operational contacts on both sides that hold the relationship.

   vii. Agree in writing clear and robust partnership arrangements ensuring that transparency and accountability are maintained. Monitor, evaluate and review the partnership at pre-agreed points.

   viii. Share experiences and good practice with a conscious effort to engage and involve at all levels in order to encourage learning.

   ix. Promote successes within and outside of the Federation.

8. Depending on the scale and scope of the partnership in question, an appropriate level of approval should be sought. Where a partnership is being brokered by an MA, the Governing Body at country level should be involved and there should be clearly established lines of communication with Secretariat. If the partnership extends to multiple countries, or is of high value or is high risk, the Director General should be consulted. The person holding the partnership must be clearly identified and communicated to all key stakeholders.

9. When considering the reputational risk of working in partnership with organizations in the field of sexual and reproductive health including the pharmaceutical industry, the following practices should be followed:

[2] Please refer to Annex A: Glossary point 2
[3] Please refer to Annex A: Glossary point 3

i. The Secretariat and Member Associations should not endorse any product in a way that implies it is better than other products with identical formulations or use.

ii. Whilst recognizing that Member Associations must aim to offer clients high quality products, they should not endorse a manufacturer's claim of product superiority over other similar products.

iii. When working with specific products, the principles and requirements of IPPF Policy 3.4 'Purchase of Contraceptives, Condoms and Reproductive Health Medicines' should be referred to in the first instance.

iv. The Secretariat and Member Associations should not be compromised when considering an external partnership of this nature. They should follow a clear process that will safeguard the transparency, integrity and independence of their work. Please refer to IPPF Policy 3.10 on 'Transparency' for further guidance.

10. When considering entering into research or monitoring collaborations with organizations in the field of sexual and reproductive health including pharmaceutical companies, the following practices should be followed**:**

i. Any proposals of this nature should be reviewed by IMAP if appropriate and required. [4]

ii. Cash or in-kind grants for research purposes may only be accepted if it is clear that they will not affect the independent status of the Secretariat or Member Associations, or the outcome of the research or monitoring programme in question.

iii. The results of any part of the Secretariat or Member Association monitoring programme may only be used by collaborating external organizations with explicit prior agreement. In these cases, the results must be presented fairly and objectively.

11. This policy does not relate to the contracted procurement of goods, services or the purchase of contraceptives. Please refer to the IPPF Supplier Code of Conduct and Procurement Principles. In addition, IPPF Policy 3.4 'Purchase of Contraceptives, Condoms and Reproductive Health Medicines' provides further guidance.

12. When partners or potential partners offer gifts in kind, please refer to the IPPF 'Gift in Kind Principles' in the Private Sector Partnerships Toolkit for guidance on acceptable practice. In addition, IPPF Policy 3.11 to 'Combat Bribery' provides further guidance.

[4] Please refer to Annex A: Glossary point 6

Risk in Partnerships

13. When considering potential risks in new partnerships, IPPF should take the following approach:
    i. A key consideration for all external partnerships should be guided by whether the shared partnership objectives are clearly connected to delivery of IPPF's mission.
    ii. **Types of risk**: These include **operational** – the potential impact on our ability to operate effectively, **financial** – our ability to secure funding, protect current and future funding, **reputational** – potential impact of a reduction in reputation and stakeholder confidence, and **developmental** – impact on our ability to achieve expected results, for example in relation to the IPPF Strategic Framework.
    iii. Consideration of partnership benefits versus partnership risks should be reviewed via the tools annexed to this policy namely the Private Sector Partnerships Process Diagram Annex B and Sample Risk Assessment found in the Private Sector Partnerships Toolkit. These tools should be used in order to assess why IPPF wants to work with a partner and how the partnership could be mutually beneficial.
    iv. Factors that IPPF and Member Associations should specifically consider include the human rights record of the potential partner (in relation to employment, policies, practices) and the views of the organization about sexual and reproductive health issues.
    v. Response to and advice around potential criticism or issues should be in consultation with IPPF communications team.
    vi. Please refer to IPPF Policy 1.14 on Risk Management for further guidance.

Implementation:

14. Nothing in this policy shall contravene the IPPF Constitutional provisions of check 1.1.3, which states that "The Member Association Constitution should state that it is a not-for-profit organization which is not and shall not be controlled by commercial interests and that all its income, commodities and property shall be applied solely towards the promotion of its objects."

15. IPPF will monitor the implementation of this policy closely and will continue to review best practice with regard to NGO relationships with the private sector.

16. Member Associations will meet the clauses outlined in this policy when developing local, national or international partnerships.

17. The IPPF Secretariat should use all available mechanisms in the Federation to regularly monitor the implementation of this policy and report to the appropriate governing body. The implementation of this policy should be adequately resourced and supported by IPPF Senior Management Team.

18. Further guidance can be found around Private Sector Partnerships in the IPPF Private Partnership Resource Toolkit.

Policy Annexes

- **Annex A:** Glossary
- **Annex B:** Private Sector Process diagram

Private Partnership Resource Toolkit

1. Private Sector Partnerships Risk Assessment
2. Sample Collaboration Agreement and sample MOU
3. Gifts in Kind
4. Supplier Code of Conduct
5. Conflict of Interest Declaration
6. IPPF Procurement Principles

As adopted by Central Council, November 1990
Last amended by Governing Council, November 2015

Annex A

Glossary

1. **Guiding Principles of the UN Global Compact** (Policy point 5.ii)

The UN Global Compact is a worldwide corporate sustainability initiative which calls to companies to align strategies and operations with universal principles on human rights, labour, environment and anti-corruption, and take actions that advance societal goals and are a force for good.

2. **Exit Strategy** (Policy point 7.iv)

A pre-determined plan for exiting the partnership that is agreed in writing. This strategy should enable each partner to safely leave the partnership either at the end of the contract term whereby all objectives have been successfully met or before if there have been insurmountable challenges or failures and this is deemed necessary. This strategy should include handover or completion of any residual actions, agreement on external communication of the partnership ending, taking learning points forward and next steps for sourcing new opportunities (especially if the partnership is of high monetary value).

3. **Steering Group** (Policy point 7.vi)

A representative group of individuals who come together to strengthen, drive and facilitate a successful partnership. They may be guided by Terms of Reference and will contribute in the planning and monitoring of the partnership work as well as ensuring it is operating efficiently. For example, the steering group should advise when finalizing partnership terms in the lead up to contract signing and should also monitor during the partnership that objectives and targets are on course to being achieved and all parties are satisfied.

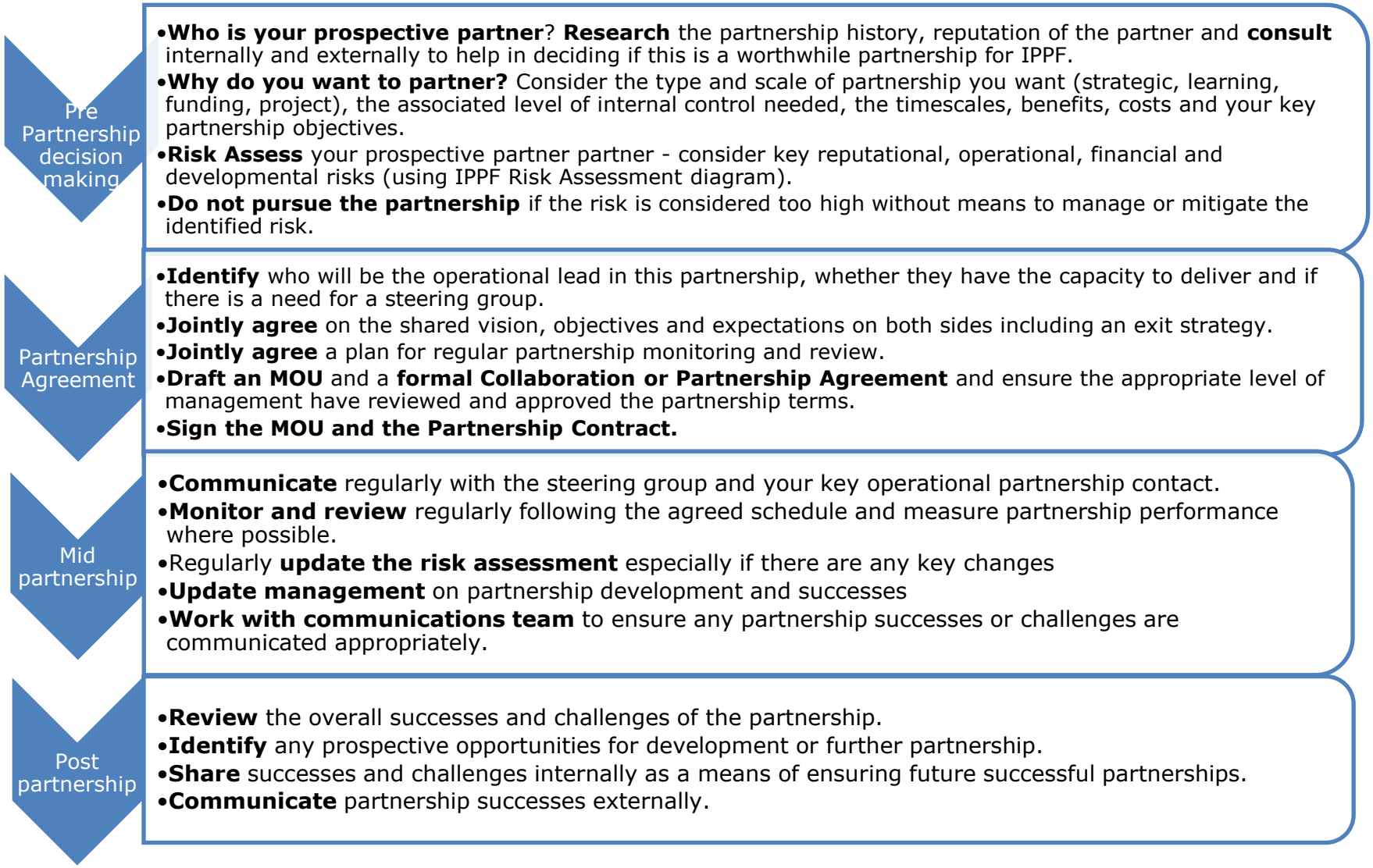
4. **WHO Guidelines** (Policy point 9.iii)

A WHO guideline is any document developed by the World Health Organization containing evidence-based recommendations for clinical practice or public health policy. A recommendation tells the intended end-user of the guideline in specific situations to achieve the best health outcomes possible. It offers a choice among different interventions or measures having an anticipated positive impact on health and implications for the use of resources.

5. **IMAP** (Policy point 9.iii and 10.i)

The International Medical Advisory Panel (IMAP) is a body of medical scientists and experts on other relevant fields with a mandate to formulate and disseminate recommendations to IPPF and other interested parties regarding best practices in sexual and reproductive health and rights (SRHR), based on the best available evidence.

Annex B
Private Sector Process Diagram



Policy 3.8

3.8 EXPENSES OF AND PAYMENTS TO VOLUNTEER

Volunteers who are IPPF Trustees

1. The UK Charities Law requires that a registered charity have a clearly identifiable body of people who are responsible for the general control and management of the administration of the organisation. In the UK these are referred to as "trustees", but they may be called executive or management committee members, board, council of management, or directors, or they may be referred to by some other title. Whatever the trustees are actually called, their responsibilities, as trustees, are the same.
2. The trustees of IPPF are the fifteen elected members of Board of Trustees.
3. This section of the policy applies to volunteers who serve in their individual capacity on the IPPF Board of Trustees and are IPPF's trustees or those who serve on the Board Committees or any other governing body (Nominations and Governance Committee, etc) set by IPPF. They are subject to the United Kingdom Charities Law and the rules laid down by the Charity Commission.
4. The UK Charities Law states that trustees or committee members cannot receive any benefit (which includes payment, services, facilities, funds or other benefits of measurable value) from their charity unless they have express legal authority to do so. This is to uphold the principle that if trustees (committees' members) are not allowed to receive any benefits from their charity they will not have any conflict of interests when they come to allocate resources.
5. The restrictions on payments and other benefits to IPPF trustees (or committees' members) apply equally whether the payment or benefit is received directly, or indirectly through a "related party" of the trustee (or committee member) such as a relative or member of the same household, business partner, or company in which the trustee has an interest.
6. Examples of indirect benefits would include:
    i. Employment of a relative or member of the same household of a trustee (or committee member) by IPPF or a Member Association.
    ii. Ownership by the trustee (or committee member) or a "related party" of land or buildings rented by a Member Association.
    iii. Payment for goods or services by IPPF or a Member Association to a company in which the trustee (or committee member) or its "related party" has a directorship position or share ownership over 1%.
7. A more comprehensive list of examples of potential indirect benefits can be found in the Declaration of Material Transactions and Interest form that all trustees (and committee members) complete annually. It is the responsibility of Board of Trustees (or committees) to seek advice from the Secretariat, in case of doubt, as to whether a transaction represents an "indirect benefit" before it takes place.

8. IPPF Trustees and Committees members, should not receive such indirect payments or benefits unless it is necessary and reasonable in the best interest of the Federation and approved in advance by the UK Charity Commission.

9. The refund of legitimate expenses to IPPF trustees (or committees' members) are allowed. Expenses are refunds of amounts a trustee (or committee member) has needed to meet personally, or which have been met on his her/their behalf, in order to carry out trustee or committee member duties. Even in the absence of anything specific in the governing document, the law clearly entitles a trustee (or committee member) to repayment from the charity of expenses that have been properly incurred. The law enables the trustee (or committee member) to recover out-of-pocket expenses as long as the trustee (or committee member) does not profit from his or her role as a trustee (or a committee member).

10. It shall be the responsibility of the Director-General to devise suitable systems and procedures to meet the Charity Commission requirements on expenses and payments to IPPF trustees.

Trustees of Member Associations who are attending General Assembly Meetings, Regional Forums and other meetings organized by IPPF

11. This section of the policy applies to trustees of Member Associations who are not members of IPPF Board of Trustees or any other governing body or board committees of IPPF but are either:

    i. Attending the General Assembly meetings or
    ii. attending Regional Forums or
    iii. attending any other meeting/ conference/ workshop organized by IPPF

    All together referred to as meetings.

12. For the purposes of this policy such persons shall be defined as "General Assembly or Regional Forums attendees and "Member Association Trustees" respectively.

Payments

13. Generally, neither General Assemblies and Regional Forums nor the Governing Bodies of Member Associations shall make payments to Member Association Trustees who are attending IPPF's assemblies, forums and meetings or who are exercising a trustee or committee member role and responsibilities at any level. This is to avoid creating situations where there may be the potential for a conflict of interest.

14. In this connection the term "payments" shall mean payment by money or other material benefit given to a trustee or committee member out of IPPF's or a Member Association's funds in return for a service that the trustee or the committee member has performed for IPPF or its Member Association. This definition includes payments for loss of earnings; and honoraria even if the sum involved is a token one that does not reflect the real value of the service provided.

15. However, it is recognised that there may be occasions, such as where a volunteer has specialised skills or is a leading expert in the field, when IPPF or the Member Association may wish to contract for the volunteer's services.

16. Such payments may be allowed provided certain conditions are met.

i. The person receiving the benefit has had no part in the decision to pay for his or her services. Normally this would mean the member concerned leaving the meeting while the agenda item is discussed, and a decision taken.
ii. The payments are for a specific purpose and a limited period. No payments should be made for non-specific services or on an open-ended basis.
iii. Their rights as volunteers are suspended at the level at which they are functioning for the period during which the contract is in operation. Thus, a Member Association Board member who is receiving a fee or an honorarium for services provided cannot serve in this capacity until the contract is completed, nor would they be able to serve as a General assembly or attend a Regional Forum in their capacity as a Trustee, during this period.

Loans

17. Loans shall not be made to any General Assembly or Regional Forum attendee or Member Association trustee from IPPF or Member Association funds.

Expenses

18. Expenses are refunds of amounts a trustee or a committee member has needed to meet personally, or which have been met on his or her or their behalf, in order to carry out trustee or committee member duties at any level. Claims for expenses have to be supported by bills or receipts from third parties. However, to avoid unnecessary administration, a per diem may be paid or part of the individual's travel costs paid directly to the supplier and the remainder covered by a per diem. The aim should be to ensure that out-of-pocket expenses are met and that there is no element of profit.

Accounting

19. It shall be the responsibility of the Director General and the Executive Directors of Member Associations to:
    i. devise suitable systems and procedures to meet the general criteria set out above; and
    ii. ensure that the nature and amounts of all payments and refunds of expenses to trustees or committee members are identified clearly in the relevant accounting records.

Ordinary Volunteers – Member Association Members

Payments

20. Normally any services provided to an association by its volunteer members should be free. However, on an exceptional and occasional basis, if ordinary volunteers, who are not members of the Member Association's Governing Body, render specialized professional services then an appropriate payment may be made.
21. Examples of such payments are:
    i. occasional sessional clinic fees for providing services;
    ii. one-off fees for preparing and delivering a lecture;
    iii. one-off fees for preparing or editing educational or information material.

Expenses

22. Expenses are refunds of amounts a volunteer has needed to meet personally, or which have been met on his or her behalf, in order to carry out his or her duties within or on behalf of IPPF or its Member Association. Claims for expenses have to be supported by bills or receipts from third parties. However, to avoid unnecessary administration a per diem may be paid or part of the individual's travel costs paid directly to the supplier and the remainder covered by a per diem. The aim should be to ensure that out-of-pocket expenses are met and that there is no element of profit.

Loans

23. Loans shall not be made to ordinary volunteer members from IPPF or Member Association funds.

Accounting

24. It shall be the responsibility of the Executive Directors of Member Associations to:
    i. devise suitable systems and procedures to meet the general criteria set out above; and
    ii. ensure that the nature and amounts of all payments and refunds of expenses to non-trustee volunteers are identified clearly in the relevant accounting records.

Expenses of IPPF Officers

25. IPPF recognises that its Officers at global level may incur personal expenses in connection with performing their official duties on behalf of the Federation.

26. This policy shall apply to the following:
    i. the IPPF Chair, Vice Chair and other Board of Trustees;
    ii. the IPPF Board committee and other committee members.

Expenses

27. Examples of the type of expenses are:
    i. travel and appropriate meal allowances;
    ii. identifiable secretarial or administrative assistance over and above that supplied by an IPPF office or by the Member Association of which the Officer is a member;
    iii. postage, fax and courier costs;
    iv. telephone calls.

Accounting

28. Where allowable expenses are incurred on IPPF business their actual cost will be refunded by IPPF on the production of relevant accounting statements, receipts or other vouchers from third parties.

29. It shall be the responsibility of the Director-General to ensure that suitable systems and procedures exist within the Secretariat to identify all such payments and to

record them in their accounting records. Due account shall be taken of the accounting and reporting requirements of the Charity Commission for England and Wales.

As adopted by Central Council, November 1990
Last amended by Governing Council, May 2020

Policy 3.9

3.9 TRAVEL

1. Introduction

IPPF expects all to be accountable for their use of IPPF's resources. This travel policy sets out obligations of the traveller when travelling on official business. It clearly outlines the policy that needs to be followed, when making arrangements to travel on IPPF business, as well as incurring and getting travel costs reimbursed.

2. Policy Statement

IPPF expect all to promote the effective use of its resources, to ensure that the majority of its funds are directed to ensuring sexual and reproductive health and rights for all.

In line with the above, IPPF actively encourages everyone to travel only if necessary. This will ensure maximising the effective utilisation of funds and minimise IPPF's carbon footprint. The use of teleconferencing and videoconferencing, should be considered as the first option for meetings and discussions.

When travelling on official business, IPPF will endeavour to provide its volunteers, staff and other delegates, service and accommodation that is safe, secure and comfortable, but not extravagant.

3. Scope

The travel policy applies to

a. General Assembly.
b. Nomination and Governance Committee or by whatever other name it is referred to.
c. Board of Trustees and its sub-committee members.
d. All volunteers, staff, and other delegates that travel on and attend to IPPF business.
e. Guest speakers, consultants, vendors and prospective employees.

4. In the above context, value for money shall always be sought, in consideration of the:
    i. nature of the work to be undertaken;
    ii. timing and duration of the trip; and
    iii. means of travel and standard of services.
5. All travel must be approved by an authorised person/ line manager. Every authorised person/ line manager is responsible for approval of a trip, keeping in mind the above criteria ensuring that all official travel represents value for money.
6. Class of travel:
    a. Preferred mode of travel would always be economy class.

b. Individuals, who make journeys on IPPF business, where a flight is eight (8) hours or more, are entitled to travel in premium economy. In the event of premium economy not being available, economy class will be used. Use of premium economy will not require the Director General's sign off;

c. Business class travel may be undertaken by the Board of Trustees Chairperson, Vice Chair and Director-General;

d. Individuals who suffer a physical disability that results in a medical requirement to travel business class shall submit medical certificates to support this. Any Business class travel in such a case, will need a case by case approval, by the Chairperson of the Board of Trustees, in the case of volunteers, and the Director-General for staff and will be subject to availability of budget;

7. If an individual decides to upgrade her/ his class of travel, s/he can receive the cost of the ticket as calculated by IPPF and use this to buy her/his own ticket in a different class or with a different carrier;

8. Individuals who fly eight (8) hours or more, whether in economy or premium economy, may, if they wish, add an additional day to their travel to recover from their journey. IPPF will bear the hotel costs for the additional day;

9. IPPF will pay for single occupancy in a hotel of a comfortable but not luxurious standard on an actual basis.

10. Meals and other trip expenses will be covered by payment of daily allowances in accordance with IPPF travel procedures.

11. The Director-Finance & Technology shall be responsible for devising and maintaining appropriate procedures to implement this policy.

As adopted by Governing Council, November 2000
Last amended by IPPF Board of Trustees, December 2021

Policy 3.10

3.10 TRANSPARENCY

Principles

1. IPPF believes that the timely free flow of information in accessible language is essential for ensuring accountability, learning, trust and good performance. This policy reflects IPPF's commitment to transparency and to the sharing of information with clients, volunteers, staff, collaborating partners, donors and members of the public.
2. The purpose of the policy is to guide volunteers and staff of the Federation in the open sharing of information and to inform the general public what they can expect or demand, in terms of information from IPPF. This policy does not affect any legal requirements related to disclosure or non-disclosure.
3. The policy describes the minimum information that IPPF will share proactively with the general public and how it will do this. IPPF will share additional information with its own staff and with organizations it collaborates with and this will be done in a timely and accessible manner guided by the relevant agreements and documents related to the specific relationship.
4. This policy applies primarily to the IPPF Secretariat. IPPF's Member Associations are strongly urged to develop their own transparency policy in line with local circumstances and the principles and guidelines outlined in this policy.

Confidentiality and non-disclosure

5. IPPF is committed to disclosing information except in the following instances:
   i. Personal details of volunteers and staff.
   ii. Intellectual property or other information which has been disclosed or provided to IPPF under any obligation of confidentiality or which is subject to legal disclosure restrictions, or intellectual property of IPPF, unless consent of such disclosure has been obtained from the owner of such intellectual property.
   iii. Legal advice and matters in dispute or under negotiation including disciplinary and investigative information generated in or for IPPF.
   iv. Information dealing entirely with internal administration or operating systems which have no direct effect outside the organization, or internal documents written by staff to their colleagues, supervisors or subordinates, unless those documents are intended for public circulation.
   v. Information that could jeopardise IPPF's competitiveness in fundraising.
   vi. If the sharing of information in a specific local situation will make volunteers, staff and the organization or its partners vulnerable or put them at risk, IPPF may choose not to share specific information for a specified period.

Information to be shared freely and openly

6. The following categories of information will be shared freely, openly and proactively:
   i. Purpose and principles: (IPPF's vision, mission, values, goals and objectives as laid out in the Strategic Framework, IPPF Act & Regulations, Legal registration and status).
   ii. Governance, organizational and staff structure: (names of members of Board of Trustees and its committees; Director's Leadership Team; structure, functions and responsibilities of the various entities of the Federation).
   iii. Policies: (as described in the IPPF Policy Handbook and the Standards and Responsibilities of IPPF Membership).
   iv. Work plans and strategies: (IPPF's international, regional and country specific strategies, and annual work plans including financial information pertaining to key cost centres).
   v. Performance: (an account of the Federation's achievements, challenges, lessons learned and indicators of performance in relation to IPPF's strategic goals will be available in an IPPF Annual Performance Report. Programme and finance data are also available in Regional Annual Reports.).
   vi. Funds and finance: (types, proportion and absolute figures of income; sources of income, expenditure by categories; actual cost ratio for staff cost, support cost, project cost, fundraising cost, administration cost; types and location of fund investments as recorded in IPPF 's Annual Financial Statement)
   vii. Relationships: (key relationships IPPF has in terms of client groups we serve, collaborating partners, networks, coalitions, and alliances we belong to and work with, who we receive money from, where we invest our money, who are our bankers, auditors, lawyers).
   viii. Human Resource Principles: (this includes IPPF's commitments as a good employer and includes procedures related to how the Secretariat receives and deals with grievances and how we receive feedback and comments from within and outside).

Ways and means of sharing information

7. IPPF London Office and Regional Offices will be responsible for sharing information on actions and information relating to the Federation and the Secretariat according to this policy. It will be the responsibility of each Member Association to share information regarding their organization and activities, in line with this policy.
8. All information shared will be timely. Information shared will be dated to indicate the timeliness.
9. At international level, IPPF will share information mentioned above in English. Member Associations at national level will share information in the official national language or other local suitable language as they deem appropriate.
10. IPPF websites will be the main venue for sharing the information mentioned above proactively to a wide audience. IPPF, within the limits of its resources, will also send

information as requested (as per this policy) in electronic or printed form to an authentic address of a person or organization requesting information.

11. Anonymous requests for information will not be responded to.
12. Heads of different levels of the organization – Director-General, Regional Directors, and Executive Directors of Member Associations – will be the custodians of this policy but the day-to-day responsibility of implementation and management will be the responsibility of the person appointed by them to be responsible for external communications.
13. Reviewing compliance of this policy will be the responsibility of the Director-General and will be discussed in Senior Team Meetings and Governing Body Meetings as and when requested.

Making an information request

14. All email requests for information will be dealt with promptly. In those cases where information is denied, an appeal can be made to the IPPF Director-General whose decision is final.

As adopted by Governing Council, November 2010
Last amended by Governing Council, May 2020

Policy 3.11

3.11 COMBATING BRIBERY

1. Introduction

1. IPPF is committed to conducting business honestly without corrupt practices or acts of bribery, ensuring adherence to the highest legal and ethical standards. This must be reflected in every aspect of the way in which IPPF operates.
2. Bribery is a criminal offence in most countries in which IPPF operates, and penalties can be severe. In the UK, where IPPF is registered for legal purposes, the Bribery Act 2010 not only makes bribery and corruption illegal but will also hold IPPF liable for failing to implement adequate procedures to prevent such acts by those working for the organization or on its behalf, no matter where in the world the act takes place. Corrupt acts committed abroad, including those by partners working directly on our behalf for example, consultants or MAs when working on global projects, may well result in a prosecution.
3. Bribery and corruption have a range of definitions in law, but the fundamental principles apply universally. Bribery is the offer, promise, giving, demanding or acceptance of an advantage as an inducement for an action which is illegal, unethical or a breach of trust. Corruption is the misuse of public office or power for private gain; or misuse of private power in relation to business. Acts of bribery or corruption are designed to influence the individual in the performance of their duty and to incline them to act dishonestly.
4. Bribery and corruption harm the societies in which these acts are committed and prevents economic growth and development. It has been estimated that up to 25% of all aid is wasted through corruption and bribery, which results in aid failing to reach those who have the greatest need.
5. Bribes can take on many different shapes and forms, but typically they involve corrupt intent. There will usually be a 'quid pro quo' – both parties will benefit. A bribe could be the:
   - Direct or indirect promise, offering, or authorisation, of anything of value
   - Offer or receipt of any kickback, loan, fee, reward or other advantage
   - Giving of aid, donations or voting designed to exert improper influence
6. IPPF will seek to apply a "zero tolerance" approach to acts of bribery and corruption by any of our volunteers, staff, Member Associations or by partners working on our behalf. Any breach of this policy will be regarded as a serious matter by IPPF and will result in disciplinary action.

2. Actions to be taken to prevent bribery and corruption across the Federation:

i. **Risk Assessment**: Effective risk assessment is at the very core of the success or failure of this policy. Risk identification pinpoints the specific areas in which bribery and corruption risks arise and enables better evaluation and mitigation of these risks.

ii. **Facilitation Payments**: In many countries, it is customary business practice to make payments or gifts of small value to government officials in order to speed

up or facilitate a routine action or process. It may be that IPPF needs to obtain licences or permits faster than the normal course; or needs to lawfully import commodities or materials. Despite this, facilitation payments as defined here are against this policy. IPPF takes the view that they are illegal within the UK as well as within most countries in which we operate. The UK Bribery Act 2010 makes no distinction between facilitation payments and bribes – regardless of size or local cultural expectations, even if that is "how business is done here". However, in the event that a facilitation payment is being extorted, or if staff are forced to pay under duress or faced with potential safety issues or harm, such a payment may be made. If such a situation arises, the payment should be recorded clearly within IPPF's books and records as a bribe, reflecting the reason for the underlying transaction.

iii. **Gifts, Entertainment and Hospitality**: It is IPPF's practice not to accept gifts unless refusal causes offence. In these cases, physical gifts should be given to the Human Resource (HR) department for appropriate disposal without causing offence to the donor. Some activities will fall within the bounds of normal business practice and are acceptable provided they fall within reasonable bounds of value and occurrence. All gifts of significant value should be reported and recorded. A variety of factors such as customs, culture and expectations may influence the level of acceptability. If staff feel uncertain at any time regarding cultural acceptability of gifts, entertainment or hospitality, they should consult their line Manager or HR department. The provision of gifts and hospitality by IPPF should also be reasonable in terms of value and occurrence.

iv. **Accurate Books and Record-Keeping**: It is imperative that accurate books, records and financial reporting, within offices and books are kept. Overall financial reporting must be maintained and be transparent. False, misleading or inaccurate records of any kind could potentially damage the organization.

v. **Effective Monitoring and Internal Control**: All parts of the Federation must maintain an effective system of internal control and monitoring of our transactions. Once bribery and corruption risks have been identified and highlighted via the risk assessment process, procedures can be developed within a comprehensive control and monitoring programme in order to help mitigate these risks.

vi. **Relationship with partners:** Member Associations, Central or Regional Office are responsible for the evaluation of their partner relationships and informing them of our Bribery policy and the need to adhere to it.

vii. **Local Adaptation:** In order for this policy to be effective, it is necessary for it to be applied across IPPF worldwide, taking into consideration the diverse cultural environments in which we operate. This may require each Member Association or Region to adapt certain sections of this policy – such as gifts, entertainment and hospitality – to ensure they are fair, appropriate, and applicable and within national laws and charity guidelines.

viii. **Raising concerns:** All individuals, volunteers and staff, have a responsibility to help detect, prevent and report instances not only of bribery, but also of any other suspicious activity or wrongdoing. The organization is absolutely committed to ensuring that all staff and volunteers have a safe, reliable, and confidential way of reporting any suspicious activity. In the event of a concern regarding a suspected instance of bribery or corruption, staff and volunteers as highlighted in

the whistle blowing policy can contact their own Manager, Regional or Divisional Director. If this is not practical, contact the Head of Human Resources in London or the Director General.

3. This policy should be read in conjunction with IPPF policies and guidelines on whistle blowing, gifts, fraud and transparency which are all complementary.

As adopted by Governing Council, May 2012

Policy 3.12

3.12 FRAUD

1. Introduction

1.1. IPPF has a responsibility to ensure that it acts in the best interests of its clients and supporters at all times. This includes ensuring that its resources are used efficiently for the purposes intended and are not wasted or diverted due to fraudulent activities.

1.2. Consequently, this responsibility passes down to all staff and volunteers engaged by the IPPF Secretariat and its Member Associations.

1.3. Fraud covers acts such as deception, bribery, forgery, extortion, corruption, theft, conspiracy, embezzlement, misappropriation, false representation, concealment of material facts and collusion. It usually involves depriving someone of something by deceit or obtaining something by deceit, which might either be straight theft, misuse of funds or other resources, or more complicated crimes such as false accounting and the supply of false information. Fraud is not restricted to monetary or material benefits but includes intangibles such as status and information.

1.4. Fraud can be perpetrated not only against IPPF, but also in favour of IPPF, such as deceiving donors into providing funds for non-existent activity, or double-reporting single activities to more than one donor. IPPF does not tolerate either kind of fraud.

2. Policy

2.1. IPPF has zero tolerance of fraud of any type or in any circumstances, whether carried out by volunteers, staff, contractors, partners or clients. Fraud against IPPF depletes funds intended for the accomplishment of programme delivery, undermines effective functioning and jeopardises sustainable development by diverting donor contributions.

2.2. Fraud detection and prevention is the responsibility of everybody in IPPF, not just leadership and management.

2.3. Staff reporting fraud should be protected by local whistleblowing or complaints policies.

2.4. Employees found to have been involved in fraudulent activities must expect to be dismissed for gross misconduct in accordance with local policy and legislation.

2.5. It is recognized that fraud has a different legal standing in each country in which IPPF operates and therefore the legal response to fraud must reflect this local context.

2.6. Notwithstanding paragraph 2.5, any person (employee or otherwise) or organization implicated in a fraud should be dealt with through the local legal system where appropriate.

2.7 **Prevention of Terrorist Financing**

IPPF is wholly committed to not fund or receive funds from terrorist individuals or organisations and has introduced and embedded actions into

our policy and practice to ensure that we are taking steps to prevent any engagement with terrorism. IPPF is also taking these steps to ensure that it is fully compliant with banking regulations and donor compliance requirements.

These actions include:

1. A commitment to carry out searches for all IPPF procurement (including existing and potential suppliers), new and existing IPPF Secretariat staff (under the pre-employment referencing process), partners/donors and Member Associations, against the following external databases:
    - System for Award Management (SAM) – US Government database
    - Specially Designated Nationals (SDN) – US Government database
    - UN Sanctions List
    - Any other relevant databases as per external donor or UK Government requirements.

    These databases list individuals and organisations excluded from doing business with national or international organisations due to violations of regulations for involvement with terrorism.
2. Identification in IPPF Procurement Principles and associated procedures of the risk of terrorist financing and the need to carry out appropriate due diligence to ensure this risk is mitigated.
3. A Preventing Terrorism provision is included in 2016 unrestricted and restricted funding for all recipients and the risk of terrorist financing is to be included and monitored in the IPPF Risk Register.

Should any evidence of links with terrorist activity be found within IPPF procurement, funding streams, staff or MAs, appropriate corrective action will be taken in compliance with local legislation. IPPF recognizes that, as per the international legal obligations of states, such legislation should comply with international law, in particular international human rights law. Please refer to the IPPF Fraud Policy Implementation section for further guidance on appropriate response protocol.

3. Implementation

The IPPF Secretariat and Member Associations have a number of distinct roles to play in implementing this policy.

3.1. Each IPPF Secretariat office and Member Associations will:

3.1.1. Have a fraud response plan and ensure it is effectively implemented. The fraud response plan will provide full details of how the organization reports, responds to, and investigates fraud allegations. It is extremely important to consider the local legal situation regarding fraud and build this into the fraud response plan. The fraud response plan should contain information on the followings areas: scope of the plan; summary of the fraud policy; possible sanctions for fraud; securing and gathering evidence; relevant Human Resource policies to consider whilst investigating employees; reporting and communication lines; roles and responsibilities; guidance on police involvement; and approach to impact assessment and lesson

learning. The Secretariat approach to policy implementation is laid out in the Secretariat Fraud policy guidance

3.1.2. Maintain a fraud register that contains summary details of all alleged frauds. The register should include, as a minimum, information on the following areas: date of the fraud; nature of the fraud; details of those involved; value of the fraud; and the outcome of the investigation, including whether legal action was taken.

3.1.3. Be responsible for local fraud reporting in compliance with local legislation.

3.1.4. Implement an effective approach to fraud risk management. This will involve identifying the key fraud risks and evaluating the likelihood and impact of their occurrence. For a fraud to occur four basic elements are essential: people to carry out the fraud; assets to acquire fraudulently; intent to commit the fraud; and opportunity to defraud. Fraud detection and prevention addresses these elements through such measures as appropriate internal controls, including recruitment procedures, physical controls and controls to detect and punish fraudsters, but also through promotion of an anti-fraud culture.

3.1.5. Ensure that organizational culture encourages and facilitates the detection and prevention of fraud. Leadership of IPPF at all levels must demonstrate that fraud is unacceptable, and perpetrators will be dealt with seriously. The actions and words of the leadership will give confidence to staff to report fraud and deter staff from committing fraud.

3.1.6. Fraud targeted at the Secretariat or against the cash or commodities transferred to a Member Association by the Secretariat must be reported to the IPPF fraud email address (fraud@ippf.org) and to the Director General. The fraud email address is monitored by the IPPF London Office for reporting purposes, the final outcome of reported fraud will be reported to the Director General.

3.1.7 IPPF Secretariat will use all available mechanisms in the Federation to periodically and consistently monitor implementation and review the policy statement. The implementation of this statement should be adequately resourced and supported by the Secretariat.

As adopted by Governing Council, November 2014
As amended by Governing Council, May 2016

Policy 3.13

3.13 FINANCIAL CRIME

4. Background and Purpose

4.1. IPPF is proud of the work it undertakes around the globe and is committed to ensuring highest standards are implemented in the prevention of financial crime across the regions within which it operates.

4.2. IPPF's financial crime policy aims to:

a) highlight the areas of financial crime that IPPF may be targeted for and/ or exposed to;

b) prevent, as much as is possible, IPPF from being used for financial crime;

c) comply with the applicable legal requirements; and

d) ensure that the most appropriate action is taken by IPPF to identify and mitigate the risks associated with financial crime.

5. Financial Crime Policy Statement

5.1. IPPF does not tolerate criminal activity of any kind. IPPF's reputation is based on doing the right thing and IPPF is committed to ensuring that it adheres to all laws and regulations applicable to its activities.

5.2. IPPF also expects its Member Associations and Collaborative partners to have the same highest standards of intolerance towards any criminal activity.

6. Scope

6.1. IPPF policy on financial crime applies to all staff, trustees, volunteers and parties (vendors/ donors, etc.) working with or contributing to IPPF work.

6.2. Wherever the policy refers to IPPF, it includes IPPF along with all its Member Associations and Collaborative Partners.

6.3. IPPF policy on financial crime encompasses its commitment to mitigating, preventing and taking corrective actions, against the following types of financial crimes or in the following types of situations:

a) Money Laundering (ML)
b) Terrorist Financing (TF)
c) Bribery & Corruption
d) Fraud
e) Financial Sanctions
f) Export Controls

4. Definitions

4.1 Financial crime is generally defined as crime involving the unlawful conversion of the ownership of property belonging to one person, for one's own personal use and benefit. Financial crimes may involve money laundering, terrorist financing, illegal

dealings where financial sanctions are applicable, illegal export wherein export control provisions apply, bribery and corruption and fraud.

Money Laundering

4.2 Money laundering is the term used to describe the ways in which criminals process money derived from the proceeds of any illegal activity (e.g. the proceeds of drug dealing, human trafficking, fraud, theft, tax evasion) through a succession of transactions and deals until the original source of such funds has been obscured and the money takes on an appearance of legitimate or 'clean' funds. The main money laundering offences are:

- **Concealing** – where someone knows or suspects a case of money laundering, but conceals or disguises its existence.
- **Arranging** – where someone is involved in an arrangement to assist in money laundering.
- **Acquisition, use, possession** – where someone tries to benefit from money laundering by acquiring, using or possessing the item concerned.
- **Tipping off** – where someone warns a person who is or is suspected of being involved in money laundering in such a way as to reduce the chance that the person will be investigated or prejudice the possible investigation.

4.3 The consequences of committing an offence is potentially very serious. Whilst it is considered most unlikely that any of IPPF, its Member Association or Collaborative partner staff, volunteer, partner, donor, etc., would commit any of the four main offences, failing to reveal a suspicion of a case of money laundering too is an offence.

Terrorist Financing

4.4 Terrorist financing is raising, moving, storing and using of financial resources for and/ or in support of terrorism.

4.5 These funds come from legitimate sources but are used for terrorist activities. The most basic difference between terrorist financing and money laundering is the origin of the funds. Terrorist financing uses funds for political destabilization, but the money is not necessarily derived from illicit proceeds. On the other hand, money laundering always involves the proceeds of illegal activity.

4.6 The offence of terrorist financing involves the provision, collection or receipt of funds with the intent or knowledge that the funds will be used to carry out an act of terrorism or any act intended to cause death or serious bodily injury. It also includes collecting or receiving funds intending that they be used or knowing that they will be used for the benefit of a terrorist group. The Criminal Justice (Terrorist Offences) Act 2005 gave effect to the 1999 United Nations Convention for the Suppression of the Financing of Terrorism. It created a new offence of financing terrorism and inserted a scheme through which law enforcement bodies can freeze and/or confiscate funds used or allocated for use in connection with an offence of financing terrorism or funds that are the proceeds of such an offence.

Bribery & Corruption

4.7 IPPF defines bribery and/ or corruption wherever an improper inducement is taken and/ or provided:

a) not just as cash payments, but cover gifts, travel, entertainment, training programmes, work experience, charitable contributions and sponsorships.

b) using a third party as a conduit to channel bribes to others

4.8 In most countries, it is a crime to offer, promise, give, request, accept or agree to receive a bribe of any kind, in any form, either directly or indirectly.

Fraud

4.9 Fraud describes such acts as deception, bribery, forgery, extortion, corruption, theft, conspiracy, embezzlement, misappropriation, false representation, concealment of material facts and collusion. It usually involves depriving someone of something by deceit, which might either be straight theft, misuse of funds or other resources, or more complicated crimes such as false accounting and the supply of false information. Fraud is not restricted to monetary or material benefits but includes intangibles such as status and information.

Financial Sanctions

4.10 Financial sanctions are restrictions put in place by organizations/ state/ countries like the United Nations (UN), European Union (EU), United Kingdom (UK), United States (USA), etc. Financial sanctions are generally imposed to:

a) coerce an organisation, country, or individuals within an organisation, country, into changing their behaviour (or aspects of it) by increasing the cost on them to such an extent that they decide to cease the offending behaviour;
b) constrain a target by denying them access to key resources needed to continue their offending behaviour, including the financing of terrorism or nuclear proliferation;
c) signal disapproval, stigmatise and potentially isolate a country, an organization or an individual, nationally or internationally; and/or
d) protect the value of assets that have been misappropriated from a country until these assets can be repatriated.

4.11 The sanctions either target individuals, organisations or countries and can:

a) Limit the provision of certain financial services
b) Restrict access to financial markets, funds and economic resources.

4.12 Breaching sanctions is a criminal offence and the most serious cases could incur prison sentences of up to seven years.

Export Controls

4.13 Export controls are essentially a network of inter-related regulations that govern and regulate the shipment or transfer, by whatever means, of controlled items.

4.14 When importing or exporting goods IPPF must consider whether the goods being imported and/ or exported fall within any regulatory control provisions. If they do, then before importing and/ or exporting such items IPPF may have to apply for a licence from the relevant authorities as permission to import/ export such controlled items.

4.15 Goods controlled under any prohibition orders, exported without an adequate licence is considered illegal.

5 Guiding Principles

5.1 This policy reflects IPPF's commitment to prevention, detection and management of financial crimes.

5.2 The guiding principles set out here under provide overall direction and guidance to IPPF in drafting procedures covering the prevention, detection and management of financial crime.

5.3 IPPF has zero tolerance towards any type of financial crime including money laundering, terrorist financing, bribery and corruption and fraud of any type or in any circumstances, whether carried out by volunteers, staff, contractors, partners or clients.

5.4 IPPF is committed to ensuring compliance of its various functions/ activities to financial sanctions and/ or export controls that may be put in place by organizations, countries in the regions that it works in.

5.5 Financial crime against IPPF depletes funds and exposes it to high reputational risk that could prevent it from accomplishing programme delivery, undermines effective functioning and jeopardises sustainable development by diverting donor contributions.

5.6 IPPF is committed to the prevention, deterrence and detection of money laundering, terrorist financing, bribery, corruption and fraud.

5.7 IPPF does not and will not pay or use a third party to pay bribes or offer improper inducements to anyone for any purpose, nor will it, accept bribes or improper inducements.

5.8 IPPF does not and will not, engage indirectly in or otherwise encourage any type of bribery and/ or corruption.

5.9 Fraud in favour of IPPF affects its reputation and ability to attract ethical donations.

6 Implementation

6.1 The IPPF Secretariat should use all available mechanisms in the Federation to periodically and consistently monitor implementation of the Financial Crime Policy and report to the appropriate governing body incidences relating to financial crime that may be detected and actions taken thereof.

6.2 The implementation of this policy should be adequately resourced and supported.

6.3 IPPF will further review and strengthen, as required, all other existing policies of IPPF, such as the Safeguarding, Policy to Combat Bribery, IPPF Fraud Policy & Secretariat Fraud Policy Guidance and Procurement policy, to ensure adequate controls are built in to protect IPPF against financial crime. These include but are not limited to IPPF's commitment to:

a) Designate key focal points at all levels, for providing oversight of implementation of the financial crime policy.

b) Strengthen existing systems for preventing, recognizing, investigating and reporting any breaches of the financial crime policy across IPPF. This will inter alia include:

- Increase awareness of financial crime, its prevention, detection and management within IPPF;
- Enhance processes for screening trustees, employees, members/ partners, donors and suppliers against specific sanctions lists published by key Governments;

- Conducting enhanced due diligence (EDD) on associates assessed as higher risk, such as Politically Exposed Persons (PEPs) holding senior positions;
- Continue to take adequate preventive steps to uphold restrictions that are part of any sanctions by countries and organizations such as United Kingdom, European Union, the United States, the United Nations, etc.) whilst dealing with Member Associations, Collaborative partners, donors, vendors, etc.
- Ensuring adequate training is provided to key personnel and focal persons, so that ongoing monitoring of internal controls is ensured to adequately prevent, detect and manage incidences relating to financial crime.
- Obtaining any kind of licences/ certifications that may be required to continue to work in sanctioned countries and importing/ exporting controlled goods either into or out of geographies where IPPF works.

6.4 IPPF's actions relating to bribery and corruption will be governed by IPPF's policy to combat bribery.

6.5 IPPF's action relating to fraud will be governed broadly by IPPF's Fraud Policy and IPPF's Secretariat Fraud Policy Guidance.

6.6 Maintain adequate documentation as evidence of internal control system used to support the financial crime policy

As adopted by Governing Council, May 2019

Policy 3.14

3.14 COST RECOVERY

Background and Purpose

a) IPPF is a globally connected and locally owned civil society movement that provides and enables sexual and reproductive health services and champions rights for all, especially the poor, under-served and vulnerable population.

b) IPPF's movement of locally owned institutions takes forward the mission and vision of ensuring all people are free to make choices about their sexuality and wellbeing, in a world without discrimination.

c) In order to accelerate its ability to generate more restricted and unrestricted funds to deliver its strategic commitments IPPF had set an ambitious target of doubling income generated by the Secretariat by 2022. In order to achieve this target, IPPF has recently come up with its Global Income Generation Strategy that puts forward commercial approaches to income generation and long-term sustainability. These approaches articulate a focus on delivering well and leveraging current funding, enhancing IPPF's competitiveness by strengthening internal systems and processes and leveraging expertise across the federation to grow MA generated income.

d) However, the current reality is that IPPF, including many of its Member Associations, are dependent on unrestricted funding from donor governments and foundations to sustain core organisational programmes, infrastructure and systems, including overall grant management and compliance and thereby have not really developed a commercial approach towards projected management.

e) At the same time, over the years, the proportion of restricted/ project funding has been steadily increasing, as compared to a more or less stagnant level of unrestricted funding. In 2018, IPPF's total group income into the Secretariat was US$112 million, of which US$57.8 million was unrestricted and US$52.2 million was restricted income. From the total restricted income, IPPF recovered approximately 7% as overheads, or US$3.8 million, which represents 3.4% of the total group annual income. This does demonstrate that IPPF has not been able to charge its 'true costs' to various funded projects.

f) In order to enhance IPPF's competitiveness and ensure long term sustainability of the organization, there is a need to improve operational effectiveness which besides other things requires developing a consistent and transparent approach to plan and account for programme and support costs.

g) In order to do this, IPPF is developing a transparent cost recovery model for all programming, underpinned by a cost analysis, to ensure full cost recovery from various projects.

h) This Cost Recovery Policy will enable IPPF to demonstrate greater transparency in the utilization and value add of unrestricted and restricted funding, including the role that each type of funding in supporting organisational sustainability, and enabling better response to donor compliance and scrutiny.

i) This Cost Recovery policy will simply but clearly demonstrate the obligation for IPPF to ensure that unrestricted resources are not used to subsidize the implementation

of funded projects and the use of restricted funds are maximized to achieve strategic outcomes and priority objectives of the federation.

Scope

j) Cost Recovery Policy shall move IPPF towards 100% recovery of the Secretariat wide costs, associated with its programmes/ initiatives from funded projects.

k) IPPF's Cost Recovery Policy will be applicable to the Unified Secretariat.

l) For Member Associations, cost recovery will be maximised drawing on the Member Association's own cost recovery policies. The Secretariat will develop guidance for Member Associations to develop a cost recovery policy if they do not already have one.

Guiding Principles

I. The key principles underpinning the Cost Recovery Policy include:

II. Simplicity

III. Transparency

IV. Fairness

V. Sustainability

VI. Value for money

VII. Improved delivery against unfunded priorities

Definition

m) Full Cost Recovery means securing funding for, or 'recovering', all costs, including the direct costs of programmes and all associated overhead costs. Every organisation, whether voluntary, public or private, needs to recover all its costs, or it cannot pay its employees, support functions, governance, and fundraising, offer its products and services, or plan for the future and the continued development and delivery of its services.

n) There are two main types of costs that are to be considered whilst calculating total cost recovery:

   i) Direct costs are those which are directly attributable to the programme. This includes costs such personnel, technical assistance, project monitoring, procurement of equipment and supplies, and any other project activities.

   ii) Overhead costs are support costs that are shared across programmes and cannot be directly attributed to the implementation of specific programme/ project activities, including costs related to management, governance and oversight, strategy and planning, training, audit and investigations, programme development, systems, and communications. These costs support the organisation's ongoing sustainability and are essential for supporting critical functions and investments.

Cost Recovery Policy Statement

o) IPPF's Cost Recovery Policy aims to move IPPF towards 100% recovery of costs associated with delivering all funded programmes and strategic priorities. This will be achieved by each funded project recovering its associated direct and overhead costs.

p) An annual analysis of cost of the work undertaken by the Secretariat will provide a per cent (%) break up of costs to be recovered through direct or overhead costs. This is called the Cost Recovery Rate. The cost recovery rate will be calculated and monitored using a three-year rolling average of historic expenditure of the entire Secretariat.

q) All project proposals (restricted or otherwise) developed and submitted in the year will use that year's Cost Recovery Rate.

r) A lower Cost Recovery Rate under any project proposal will require an approval from the Directors Leadership Team (DLT).

Implementation

s) IPPF's Financial Controller will be accountable for the implementation of the Cost Recovery Policy.

t) It will be the responsibility of all teams, across the Unified Secretariat, to ensure adequate cost recovery for their respective teams. This will include those involved in proposal development, strategic framework implementation and support functions.

u) The application of IPPF's Cost Recovery Policy would be applied to all funded programmes/ projects implemented either through restricted funding and/ or designated funding.

v) Cost recovery will be monitored at both budgeting and actual recovery levels annually, ensuring adequate burn rates across all funded projects.

w) The Cost Recovery Policy will be applied in line with donor cost recovery criteria and eligibility requirements. Some of the models for cost recovery will include inter-alia:

I. Funded Projects wherein donor stipulates fixed overhead charge. In this case the fixed % of overhead recovery will be taken towards support costs of the Secretariat and the balance cost recovery (as per the cost recovery %) will be recovered through direct charges to the project.

II. In cases where the donor does not stipulate a formula to calculate support/overhead costs, IPPF will use its own cost recovery formula (as calculated in 5 b) and recover support cost and direct costs (as far as possible) to the project budget.

III. Projects which are 'commercial contracts or complex, bilateral contracts which are purely commercial in nature' wherein payments are made to IPPF based on delivery of results (a service contract). In these cases, IPPF will charge fees such that it ensures *full cost recovery*. This is essential to ensure that charitable funding is not being used to cross subsidise commercial contracts. In addition, a risk premium shall be included to ensure that core funds are not cross subsidising commercial contacts.

x) Where there is a need to provide Technical Assistance and oversight by the Secretariat to Member Associations to facilitate the delivery of a programme financed through restricted funding, this additional cost will have to be included, as part of the MA's restricted programme budget.

y) Implementation of the Cost Recovery Policy will require all Secretariat staff to systematically record time worked against specific activities, operations and programmes.

z) Implementation of the Cost Recovery Policy will be supported by detailed guidelines to include the calculation of the Cost Recovery Rate and how this should be applied to any funded programmes.

As adopted by Governing Council, May 2020

Policy 3.15

3.15 TREASURY MANAGEMENT

1. Background and purpose

The purpose of this policy is to set out IPPF's approach to treasury management across the unified secretariat.

IPPF's London office acts as the conduit for redistributing global IPPF income. All unrestricted core income and most of the restricted income are received in London and payments to MA's and other secretariat offices are made from London at the request of the relevant secretariat office. IPPF's functional currency is USD but it receives income and makes payments in many different currencies. It has UK bank accounts in USD, GBP, EUR, AUD, CHF, NOK, DKK, SEK, and CAD.

Only 10% of IPPF's unrestricted core funding is received from donors in its functional currency of USD. The remaining 90% is received in a range of foreign currencies, including EUR, AUD, DKK, NOK, NZD, SEK, and CAD. Whilst payments from the London office are made in a variety of currencies (e.g., London office salaries in GBP, EN office costs in EUR), most grant payments to Member Associations are made in USD with approximately 40% in exotic currencies (mainly in Africa) when restricted projects are taken into consideration.

To limit the overall exposure to foreign exchange fluctuations, this policy aims to optimise returns on idle funds and identify and minimise foreign exchange (FX) risk. Keeping these broad objectives in mind, this policy has been prepared on the following principles:

- cash is to be treated as an asset which needs to be optimised for the furtherance of IPPF's charitable aims and objectives.
- no unnecessary risks that jeopardise IPPF's funds should be taken.
- only simple "best" treasury practices will be followed.
- treasury management practices will be based on investment strategies as set out and amended, from time to time in the Investment Policy.
- treasury management decisions, as far as possible, will be centralised.

2. Objectives of treasury management

As mentioned, the two broad objectives of the Treasury Management Policy are to:

2.1. Optimise return on funds

The Treasury Management Policy is intended to achieve the maximum possible return on surplus funds whilst mitigating risks and operating strictly within the framework of IPPF's Investment Policy.

2.2. Identify and minimise risks

IPPF will make all reasonable endeavours to identify and minimise its risk whilst managing its treasury in the following broad areas:

2.2.1. Counterparty risk: The risk of default by the financial institutions (defined for the purpose of this document as banks, bond issuers and investment funds) which hold IPPF's funds.

2.2.2. Liquidity risk: The risk that IPPF has insufficient available liquidities to meet its obligations as they fall due.

2.2.3. Foreign exchange risk: The risk arising from exposure to exchange rate fluctuations and the resultant impact on cash flows arising from assets and liabilities held in non-functional currency.

2.2.4. Operational risk: The risk that accounting duties are not appropriately segregated (for example there should be clear segregation of duties to prevent any single person from being able to control substantial resources or obtaining unauthorised access to account information). Operational risk also includes the risk of accurate records not being maintained, cash accounts not being regularly reconciled, or activities designed to manage treasury risks not being appropriately supervised. This also includes the risks of cash mismanagement such as misappropriation of cash assets.

3. How to Minimise Risk

3.1. Managing Counterparty risk

Depending on which type of institution or instrument IPPF invests its funds in, it could be exposed to counterparty risk. Wherever practical, to minimise this risk, IPPF will:

- invest its funds only in those institutions, which maintain and meet the ethical investment policies in line with those provided in IPPF's Investment Policy. In assessing the ethical standing IPPF will undertake the following review:
  - internet research of the ethical standing of the institution, e.g., www.business-humanrights.org. and www.ethicalconsumer.org
  - review of specific investment policies/criteria adopted by the institution.
- not invest all its funds in a single financial institution/ financial instrument.
- deposit/ investment in bonds/ papers with high credit rating (A- or higher) from at least two rating agencies (such as S&P, Moody's, or Fitch) in accordance with IPPF's Investment Policy.
- open bank accounts with financial institutions/ banks which satisfies the above criteria.

3.2. Managing liquidity risk

IPPF manages liquidities across the secretariat including its London office to ensure payment are made on time to meet all its contractual obligations and duties. It manages liquidities to optimise return on excess cash, ensure timely payments of Member Associations, partners, suppliers and offices, whilst avoiding risk of

- defaulting short-term payments,
- default in settling hedging contracts and
- incurring heavy cost, due to hasty withdrawal of invested funds.

IPPF will contemplate and analyse options to implement an

- off the shelf Treasury Management System and
- look at outsource the function, or recruit a treasurer and investment manager

to optimise and further automate its payments, cash management and cash-flow forecasting.

IPPF will also work towards producing quarterly consolidated reporting on cash positions, including positions by type of currency and source of funding (i.e. unrestricted / designated / restricted).

3.3. Managing foreign exchange risk

Foreign exchange ("FX") risk management seeks to protect IPPF against adverse FX rate changes over a medium to long-term time horizon. FX risk management includes

(i) identifying the FX risks to which IPPF is exposed, (ii) assessing and monitoring the potential impact of FX risks on the ability of the organisation to deliver on the annual operating budget and (iii) reporting on FX risks.

Mitigation strategies: To mitigate the foreign exchange risks IPPF will:

- ensure best execution of FX hedging, IPPF compares pricing between different counterparties approved by Director of Finance and IT. A list of foreign currency brokers and banks used for FX hedging is provided in appendix B. The list of counterparties for FX hedging will be reviewed on a regular basis.
- as per advice from the C-FAR, set up an FX credit line with each foreign currency broker / bank / that has been selected. The current authorised counterparties are listed in Appendix A.
- involve designated trustee(s) in operationalisation of the FX account, with the selected FX management company.
- fix subsequent years budgetary rates based on advice from the foreign currency broker / bank / FX management company.
- hedge its FX exposures by identifying currencies / grants, , by taking up hedging contracts for a maximum period of 18 months, when certainty of income is provided by the Director Donor relations and fundraising or the project lead.
- strictly prohibit any speculative currency trading.
- update the Board of Trustees and / or CFAR when necessary, about the
    - result of the FX movements and hedging contracts
    - latest development and trends in FX management.
- Regularly report to the management (each quarter) in the form of a treasury and investment management report which will include:
    - outstanding forward contracts showing their mark-to-market position.
    - overview of realised and unrealised FX gains/losses.
    - spot and forward trades executed in the past quarter.

Strategies on Grant Inflows: Key strategies that could be adopted to hedge FX risks on **grant inflows** are listed below:

- **Natural hedging** i.e., netting inflows and outflows in a particular currency to minimise the net FX exposure will always be the preferred route.
- Use of **foreign exchange OTC derivatives**[1] to reduce (offset) IPPF's exposure to FX risk will only occur where there is a comfortable level of certainty in respect of the timing and amount of the FX exposures. The following foreign exchange derivatives for FX risk management purposes can be used by IPPF:
    - **FX Spot:** transaction to buy one currency and sell another currency for 'immediate delivery' (i.e., day+2)
    - **FX Forward:** agreement between two parties to exchange a specified amount of a currency at a specified exchange rate (forward rate) on a specified date in the future.

  Prior to committing any spot or forward transactions, quotes must be obtained from at least two authorised counterparties as close in time as possible after which IPPF will execute the deal with the most competitive counterparty. The exception to this rule is where a spot transaction is required for a payment in an exotic currency in which only one of IPPF's authorised counterparties trades.

  All foreign exchange spot and forward transactions should be pre-approved by the Director of Financial Management or Director, Finance & Technology after reviewing the quotes received and in accordance with the Delegation of Authority limits. Forward contracts will primarily be entered into for the following year's unrestricted

[1] A foreign exchange derivative (OTC – Over-the-Counter) is a financial forward contract of which the payoff depends on the foreign exchange rates (based on Spot rate and interest rate differential – the so-called "swap points") of the two currencies dealt at a given point in time (either now or in future).

donor income to create certainty over the budget exchange rates, and restricted where possible.

Strategies on FX payments: To limit bank transactions and FX costs, (automated) bank converted payments (and collections) will be avoided as these transactions are not cost effective. IPPF has the following options to make FX payments:

- Make the payment through an FX payments service provider specialised in executing payments in exotic/illiquid/high spread currencies and empanelled by IPPF.
- Buy the currency outright through an FX spot (deal with an authorized counterparty) and subsequently make the payment. This process would normally require a bank account in the payment currency and therefore it is only appropriate for currencies in which the amounts and/or the frequency of payments is high and where no natural hedge is possible.

3.4. Managing operational risk

IPPF will ensure that all its treasury management activities comply with statutory and regulatory requirements. IPPF will also ensure that it puts in place adequate steps and controls to protect itself against any operational risk relating to its treasury management function. The steps that IPPF will take in managing operational risk include:

- Seek external advice from auditors, tax, or legal advisors, as and when required.
- Ensure all documentation pertaining to treasury management, including detailing counterparty relationships, payment approvals and contracts shall be kept to evidence compliance with this policy and statutory regulations.
- Ensure adequate controls are put on release of requisitions, purchase orders and bills in the Oracle NetSuite system of IPPF. This will include:
    - Strong oversight on cash position by grant/ project/ source of funding. Any overdraft, to be approved as per the authority levels, as defined in the delegation of authority document.
    - Checks and balance in place to ensure maker and checker principle always upheld in the system.
- Maintenance of bank accounts in multiple currencies in London, to enable flexibility in FX management.
- All bank accounts across the secretariat will be reconciled every month with any un-reconciling items investigated and cleared within three months by the Shared Service Unit, and approved by the Head of Hub
- Ensure all secretariat offices hold adequate cash which should typically cover the following quarter's net cash requirements.

4. Approval Authorities

Given the highly specialised nature of transactions, only the following team members may enter FX derivative transactions within their overall limits of authority as defined and approved in the delegation of authority document:

- Director, Finance & Technology
- Director of Financial Management
- Member Association Grants Accountant (FX spot transactions for exotics payments only)

Any proposed transaction outside of the mandate and authorisations of this Treasury Management Policy requires pre-approval from the Finance, Audit and Risk Committee (C-FAR).

5. Policy Review

This policy will be reviewed every two years or upon request from C-FAR

6. Version Control

Version	Effective Date	Review Date	Owner	Approved Date
Version No. 1	Early June 2021	26th March2021 (by the Finance, audit, and risk committee)	Director – Finance and Technology	Early June 2021
Version No. 2	1st December 2023	17th November 2023 (by the Finance, audit, and risk committee)	Director – Finance and Technology	November 2023

Appendix A - Glossary of terms

Term	Definition
Exotic currencies	A foreign exchange term for a thinly traded currency. Exotic currencies are illiquid, lack market depth and trade at low volumes.
Spot rate	The current exchange rate at which a currency can be bought or sold.
Forward contract	A forward exchange contract (or forward contract) is a binding obligation to buy or sell a certain amount of foreign currency at a pre-agreed rate of exchange, on a certain future date.
Natural hedging	A hedge that occurs naturally because of an entity's normal operations. For example, revenue received in a foreign currency and used to pay commitments in the same foreign currency would constitute a natural hedge.
Speculative trading	Speculative trading includes any derivative transactions (i) for which no underlying exposure exists, (ii) which potentially increase instead of reduce FX risk and/or (iii) which are entered into with the objective to generate income.

Appendix B - Authorised counterparties (FX risk management)

Corpay
StoneX (exotic currencies)
Barclays bank (BARX)

As adopted by IPPF Board of Trustees, December 2021
As amended and adopted by Board of Trustees, November 2023

Policy 3.16

3.16 INVESTMENT

1. Background and purpose

1.1. IPPF during the year holds surplus cash relating to its reserves/ designated funds and also funds on behalf of a Member Association that need to be invested in the most appropriate investment products to maximise returns commensurate with the level of risk that is considered to be acceptable to the Trustees.

1.2. This investment policy highlights the powers of the Trustees to invest (as per the IPPF Act 1977), investment objectives, level of risk considered acceptable and lays down as part of implementation, strategies to be adopted to achieve the set objectives and responsibilities of the Trustees to oversee investments at IPPF.

1.3. For clarity, IPPF is not aiming to build an endowment.

2. Scope of investment powers

2.1. The IPPF Act 1977 does not place any conditions or limitations on IPPF's power of investment. The subsidiary powers of IPPF in the IPPF Act 1977 include to:

5. (8) "appoint any person or persons (whether incorporated or not), being a bank, trust corporation or member of a recognised stock exchange or of a professional body to accept and hold in trust for IPPF any property belonging to IPPF or in which it is interested and to execute and do all such deeds, acts and things as may be requisite in relation to any such trust and to provide for the remuneration of such trustee or trustees".

2.2. To exercise the powers vested above, IPPF now wishes to set out this policy to provide directions in how it would like to manage its investments going forward.

3. Responsibilities

3.1. The Trustees' power of investment and their duties are defined by the Charity Commission. Legally, it is the duty of the Trustees to:

1) know, and act within, their charity's powers to invest.
2) exercise care and skill when making investment decisions.
3) select investments that are right for their charity; this means taking account of:
   a) how suitable any investment is for IPPF.
   b) the need to diversify investments.
4) take advice from someone experienced in investment matters unless the Trustees are of the opinion there is a good reason to deviate from this professional opinion, which is well documented and agreed upon through the relevant governance procedures.
5) follow applicable legal requirements if they are going to use someone to manage investments on their behalf.
6) review investments from on a periodic basis, at least twice a year.
7) explain their investment policy in the trustees' annual report.

4. Investment objectives

4.1. IPPF's investment objectives are to:

1) Maintain sufficient liquidity to manage day to day cash requirements.
2) Ensure cash is always available to meet immediate and short term (i.e. three months) financial needs.
3) Invest short term funds identified based on past patterns of inflows and outflows as set out in the future cash flow forecasts, in low risk short term products that maintain and enhance the value of the invested funds.
4) Invest longer term funds (such as those held on behalf of a Member Association) to maximise investment returns through interest, dividends, capital appreciation, etc as per the acceptable level of risk (as defined in this policy) on a longer-term basis.
5) Invest in simple products that can manage not only the financial risks IPPF takes, but also minimise the reputational risk that it takes, in terms of not investing in certain types of products/ companies, that may conflict with its own vision, mission and stated objectives.

5. Risk Definition and Policy Direction

5.1. It is recognized that risk is part of an investment process and needs to be managed. IPPF is mindful of the following risks and sets out its policy on each below:

1) **Counterparty risk** is the risk that a firm with which IPPF does investment business (e.g. a bank or investment manager) will default on its contractual obligations.

In order to protect itself against such risks, IPPF will only invest through banks[1] and fund managers that are properly regulated (i.e. fully compliant with their jurisdictional regulatory requirements).

2) **Investment risk** is inherent in any investment as it might generate a low return or some (or all) of the amount invested might be lost. *IPPF's overall appetite for risk is **low**. However, where IPPF invests longer term in an investment fund, certain medium to high-risk investments will be allowed to increase the potential for a higher return, but only where the risk is diversified as part of a balanced portfolio (in terms of security and level of return).*
3) **Currency risk** relates to the exchange rate risk of holding investments in currencies other than IPPF's functional currency.

IPPF will invest its assets in the currency in which they are originally denominated unless there is a requirement (e.g. from a donor) for a surplus cash balance to be held in another currency.

4) **Interest rate risk** can lead to the decline in the real capital value of an investment.

IPPF will minimise its exposure to holding long term fixed income products in the current environment of low interest rates to avoid a fall in value in real terms.

6. Risk appetite

6.1. The trustees define their risk appetite, within which the investments are to be made.

[1] The Financial Services Compensation Scheme in the UK compensates an account holder up to £85,000 per bank if a UK- authorised bank fails.

6.2. The risk appetite takes into account the risk categories as defined in article 5 of this document.

6.3. The risk appetite statement includes:

1) prioritization of risks, based on impact and likelihood.
2) the attitude of the Trustees (Meaning risk appetite) towards these risks.
3) the control procedures IPPF takes to mitigate those risks.
4) the capacity for loss, meaning IPPF's ability to absorb falls in the value of their investments.
5) the amount that is available to invest.

7. Investment strategy

7.1. IPPF will base its investment strategy on its liquidity needs as reflected in its consolidated cashflow forecast. Cash that is surplus to three months of cashflow requirements may be invested in low-risk short term products where the capital will be maintained. These products include:

1) Short term notice deposit accounts.
2) Bank secured fixed term funds (investment grade A- AAA).
3) Treasury bills and bonds issued by highly rated governments (investment grade A- AAA).

Appendix A explains the investment grade ratings and gives examples of the current ratings of products.

7.2. For longer term assets, IPPF may appoint an investment manager to invest in a portfolio with the objective of long term returns. In the event that instant access is required to the funds under investment, a margin and credit facility may also be opened against these funds. In order to remain within a balanced portfolio and allow some flexibility in managing the investment portfolio IPPF will target the following asset allocation:

Asset class	Strategic allocation	Allowed trading range
Cash	5%	+/- 5%
Equities	60%	+/- 10%
Fixed income and preferred stock	35%	+/- 10%

8. Social, environmental, and ethical considerations

8.1. Ensuring the overall investment range as listed in clause 6.2, IPPF Trustees, from time to time, may impose restrictions on and/ or suggest areas to invest in.

8.2. IPPF Trustees have decided not to own, directly or indirectly investments[2] in companies involved in businesses relating to:

1) the manufacture, distribution and sales of weapons and firearms,
2) Gambling,
3) Fossil fuel, such as coal, oil and gas
4) Tobacco.

[2] Investment could be in the form of equity, bonds, corporate papers, mutual funds and/ or any investment products that may be available as permissible investments to Charities in the UK.

8.3. IPPF Trustees have decided not to own directly or indirectly investments in companies that have been found to be involved in unethical practices such as:

1) Human trafficking
2) Child labour
3) Bribery and corruption
4) Money laundering
5) Terrorist financing
6) Supporting or dealing with restricted individuals/organizations/ countries as per specific financial sanctions

8.4. IPPF Trustees have also decided, where feasible, to actively search for and invest in companies that:

1) promote gender equality and specifically promote and include representation of women in leadership roles.
2) renewable energy.
3) other environment friendly business contributing to the reduction in greenhouse gas emissions.

8.5. IPPF will use its best endeavours to ensure the requirements listed in 7.2 to 7.4 are met. If breaches are detected, IPPF will divest as soon as possible and take corrective actions to avoid breaches to happen again.

9. Implementation

9.1. The Board of Trustees or its assigned committee

1) will review this investment policy on a biennial basis.
2) will periodically review the investment strategy and monitor investment activities against policy.
3) will consider whether IPPF's staff has the specific skills to manage investments or whether it would be more effective to use an investment manager.
4) in case required, may oversee a formal tendering process to appoint one or more investment managers to act either in an advisory capacity or with discretion to make decisions about IPPF's investments on the Trustees' behalf within the investment policy framework.
5) will approve the policy statement in the event that any discretionary powers are given to an investment manager.

9.2. In line with the policy directions provided, the management will

1) coordinate the day to day management of investments including opening and setting up investment accounts, manage the tender and selection for selection of investment managers and take any other actions required with respect to investment management.
2) agree with investment managers appropriate benchmarks and targets against which to judge performance.
3) receive regular reports from the investment managers and will review how investments are performing. If investments are underperforming, the Trustees will seek to understand whether it is for an acceptable reason.
4) ensure adequate training is provided to staff to build in-house capacity.

5) provide regular updates to the Board of Trustees and/ or its assigned committee (s) about the performance of investments, returns received, opening or setting up of accounts, requirements of change of investment manager, etc.

10. Version Control

Version	Effective Date	Review Date	Owner	Approved Date
Version No. 1	03 June 2021 (subject to approval by IPPF Board of Trustees)	26th February 2021 26th March 2021 14th May 2021 *(by the Finance, audit and risk committee)*	Director – Finance and Technology	--- June 2021

Appendix A

Investment grade is a rating of fixed income bonds, bills and notes by credit rating agencies which signifies a low risk of default. The rating determines the creditworthiness of companies based on their financial strengths and structure, past data, and growth potentials. Companies with good levels of debt, debt repayment, good earning potential and growth will have good credit ratings.

The bond ratings are not fixed and keep changing due to many economic, industry and regulatory factors.

Standard and Poor's and Fitch use the following ratings for investment grade:

<table>
<tr><td>AAA</td><td>Prime</td><td rowspan="10">Investment grade</td></tr>
<tr><td>AA+</td><td rowspan="3">High grade</td></tr>
<tr><td>AA</td></tr>
<tr><td>AA-</td></tr>
<tr><td>A+</td><td rowspan="3">Upper medium grade</td></tr>
<tr><td>A</td></tr>
<tr><td>A-</td></tr>
<tr><td>BBB+</td><td rowspan="3">Lower medium grade</td></tr>
<tr><td>BBB</td></tr>
<tr><td>BBB-</td></tr>
</table>

Current examples are as follows:

AAA - corporate bonds issued by Johnson & Johnson and Microsoft

A - Barclays Bank fixed term fund

A- - RBS International fixed term fund

Bonds with low credit quality rating (BB+ to D) are junk bonds or non-investment grade.

As adopted by IPPF Board of Trustees, December 2021

Policy 3.17

3.17 RESERVES

1. Introduction

The Charity Commission for England and Wales's guidance note ("Charity reserves: building resilience") sets out key points for the charity's trustees when setting or reporting on their charity's reserves policy. These are:

- any income received should be spent within a reasonable time of receipt.
- holding income as reserves is justified only if it is in the charity's best interests.
- the policy should take into account the particular circumstances of the charity and should not be regarded as a static policy. It should demonstrate the charity's resilience and capacity to manage unforeseen financial difficulties.
- regularly monitoring and review of the effectiveness of the policy in the light of the changing funding and financial climate and other risks.

In the above context, the Trustees must decide on the level of reserves that IPPF needs, ensuring reserves levels are neither:

- higher than necessary – which would limit the amount spent on charitable activities,

nor

- too low – which would increase the risk of IPPF not being able to carry on its activities in the event of financial difficulties in the future.

2. Policy statement

IPPF's reserves policy seeks to balance maximising spending of income raised as soon as possible with maintaining the optimum level of reserves to ensure uninterrupted operation and to provide time to adjust to a change in financial circumstances.

IPPF's reserves policy will ensure that it has the resources in place to manage financial risk and short-term income volatility and to continue to invest in initiatives to meet its goals set out in its Strategic Framework/Plan.

In line with the above, the current target general reserve level backed up with cash or cash equivalent assets of **4-6 months of the unrestricted core spend annually** is assessed as striking an appropriate balance between the need to spend income when it is received and maintaining operational integrity.

3. Scope of the document

This policy will apply to all funds held by IPPF as a group, which would include all its offices set up either as branches, subsidiaries or any other legal form.

4. Approach to setting up reserves level

The steps that will be taken whilst assessing the level of cash or cash equivalent reserves required as per this policy, as recommended by the UK's Charity Commission:

(i) Understand the nature of the charitable funds held.

(ii) Identify functional assets (cash and/or non-cash assets).

(iii) Understand the likely financial impact of risk.

(iv) Review sources of income.

(v) Assess the impact of future plans and commitments.

(vi) Agree to a reserves level.

Following the above steps, IPPF will set its target taking into account the risks arising from the potential loss of unrestricted donor income, the impact of losing restricted projects, employment relations, working capital requirements of projects, potential fraud or misallocation of funds, Member Associations' needs, unrestricted cashflow deficits arising from timings of payments and potential redundancy costs in the event of financial difficulties.

The steps undertaken to work out the target amount are provided in detail in the "Background paper on reserves policy" (April 2025) attached.

5. Forex risks - Unrealised gains and losses on forward currency contracts

Each year IPPF enters into forward contracts against core income in accordance with the Treasury Policy. At the year-end, unrealized gains/losses on forward contracts are recognised in accordance with the Charities SORP.

As these gains/losses are neither realized nor represented by actual cash movements during the year, IPPF recognises the risk of allocating these gains/losses to specific project initiatives despite these already having been budgeted in the year of receipt (income of the subsequent year being budgeted at forward contract exchange rates).

IPPF will monitor and report the level of unrealised forex gains/ losses together with movement of forward contract liability/asset, which impacts the general reserve, in order to closely oversee the impact of these fluctuations on the general reserve.

In the above context, whilst finalising the threshold levels, IPPF will take into account only assets that can be encashed for the use by the charity. This will exclude any asset/liability recognised towards unrealised forex gains against forward contracts, which are not readily available for use against the target reserve levels set in the Policy statement.

6. Monitoring general reserves

The Director, Finance & Technology will be responsible for keeping a close watch over the general reserves. Any drawdown from general reserves shall require the recommendation of the Finance, Audit and Risk Committee and approval of the Board of Trustees.

The General reserves will be reported in the management accounts of IPPF.

The overall investment/ spending plans will always be developed keeping in mind that reserves shall have to be maintained within the target range approved by the appropriate authorities.

7. Review of the policy

The Board of Trustees will approve any amendments (including to the level of reserves), if required, to the Reserves policy annually, on the recommendation of the Finance, Audit and Risk Committee, to ensure the policy remains effective in the light of the prevailing funding and financial climate and any other risks.

The Director, Finance & Technology will be responsible for bringing these amendments to the policy for review by the Finance Audit and Risk Committee.

Version Control

Version	Effective Date	Review Date	Owner	Approved Date
Version No. 1	December 2021	5 November 2021 (by the Finance, audit and risk committee)	Director – Finance and Technology	3 December2021 o/s (by the Board of Trustees)
Version No. 2	June 2025	April 2025	Director, Finance and Technology	19 June 2025

As adopted by IPPF Board of Trustees, December 2021
As amended by Board of Trustees, June 2025

3.18 PROCUREMENT

1. Background and Purpose

The International Planned Parenthood Federation (IPPF) is a global service provider and a leading advocate of sexual and reproductive health and rights (SRHR) for all.

IPPF currently has 119 Member Associations, working in 124 countries (this latter figure takes into account the 6 countries that are part of the Caribbean Family Planning Affiliation). In addition, IPPF is working with 31 Collaborative Partners in a further 27 countries where there is not currently a Member Association. This brings the total number of countries in which IPPF is working to 151.

IPPF's Secretariat comprises the London Office and Regional Offices in Mexico City, Brussels, Tunis, Nairobi, Kuala Lumpur and New Delhi and their satellites/ sub/programmes offices. The IPPF governance reforms in 2020 created a unified secretariat with a new operating model which aimed at making the entire secretariat more Member Association ("MA") centric. In order to translate these reforms into day-to-day operations, a conscious effort is being made to harmonise policies, practices and systems across all of its secretariat offices.

In line with the above, this document endeavours to define a uniform procurement policy that sets out the principles and directions that shall govern procurement of goods, works and services by, or on behalf of the International Planned Parenthood Federation (IPPF) while maintaining adequate controls to deliver best value for money for all types of procurement.

A procurement manual listing out the type of procurement, thresholds for each of them and the process to be adopted is being developed to support this policy. This manual will ensure the implementation of this policy uniformly across the IPPF secretariat.

2. Procurement Policy Statement

2.1. Scope and application

The procurement policy shall apply to all IPPF Secretariat offices (including the project offices) and its employees, consultants, contractors, and agents, involved in procurement of suppliers, consultants, service providers, or contractors, etc. It will be applicable to all types of procurements including services, goods, and works.

2.2. Guiding Principles

The guiding principles to be followed whilst undertaking any procurement across IPPF secretariat include:

a) Value for Money - optimizing quality, economy, and efficiency.
b) Fair and open competition, as per predetermined threshold levels.
c) Ethical conduct and anti-corruption measures, fostering a culture of integrity.
d) Ensure adequate internal controls whilst undertaking any procurement.
e) Proportionality of process in line with the risk and value of spend.
f) Promote and prefer to procure services and goods from suppliers working and committed to comply with environmentally responsible practices, such as

minimizing waste, reducing carbon footprint, and adhering to sustainable sourcing and production methods.

IPPF will put in all the effort to ensure it does not procure goods, services or works from supplier/ consultants/ vendors/ contractors who:

a) do not have or are not willing to comply with IPPF values and principles as enshrined in IPPF's safeguarding and child protection policies/ practices.
b) are based in sanctioned countries or themselves are sanctioned.
c) have been convicted for unethical practices, like corruption, money laundering, terrorism funding.
d) have been convicted or openly involved in human trafficking and/ or forced labour.
e) appear in blacklisted/debarred list published from time to time by UN agencies or any donor Governments.

IPPF shall ensure the above is upheld by undertaking a due diligence process using its online tool and will ensure that each of the suppliers/ consultants/ vendors/ contractors sign a standard code of conduct document certifying all the above.

IPPF shall standardise procurement principles and practices across all Secretariat offices and divisions, with the exception to where any specific local statutory requirements are to be fulfilled or specific requirements are imposed by a donor.

IPPF shall set up processes explicitly for procurement to be undertaken in the case of responding to humanitarian crisis, ensuring speed of delivery of quality products to the frontline respondents and those affected by the crisis.

2.3. Alignment with organisational policies

This section sets out the list of overarching organisational policies that guide the procurement policy and its implementation. These are but not limited to:

a) Conflict of Interest and Roles (Policy 1.24)
b) Code of conduct (Policy 1.16).
c) Safeguarding (Children and Vulnerable adults) (Policy 1.17)
d) Transparency (Policy 3.10)
e) Financial Crime (Policy 3.13) including:
   - ❖ Combating bribery (Policy 3.11)
   - ❖ Fraud policy (Policy 3.12)
f) Purchase of Medical Health Products, Including Contraceptives, Condoms, Reproductive Health Medicines, Devices And Diagnostics (Policy 3.4)
g) Forced Labour and Human Trafficking (Policy 4.19)

In addition, the procurement policy must also follow the guidelines as set out and approved by the Director General and the Finance, Audit and Risk Committee under the Delegation of Authorities.

2.4. Procurement Process Waiver

In the specific situations it may not be possible or practical to follow the IPPF procurement policy. In those cases, written approval must be obtained in advance to waive the process against a specific rationale. A waiver must be obtained in writing by the relevant director as set out in the Authorities of Expenditure and where necessary by the donor. These situations include:

a) When following the process prevents IPPF or its MAs to meet urgent health emergencies or humanitarian disasters / responses (e.g. lifesaving in the initial days of an emergency response).
b) Time given to procure not within the standard lead-time for the type of procurement as provided within the procurement manual due to factors outside IPPF or the MAs control (e.g. late donor funding, delays due to security) and will result in an inability to deliver the goods/ services in line with the programmes timeframe. Failing to plan is not an acceptable reason for an exception.
c) Limited number of suppliers or sole supplier situation in the market.
d) Procurement directly from the manufacturer, Government or public sector agencies, at cheaper than market rates.
e) Local regulatory requirements restricting import of goods (products) and/ or services, i.e. only the branded form of a contraceptive rather than the generic form approved by the national drug regulatory authority.
f) Donor imposed obligation conflicting with (as opposed to stricter than) policy; and
g) Urgent need to address major facilities failure, damages due to disaster, immediate safety and security issues.

3. Implementation

Key points to be kept in mind whilst undertaking procurement to ensure compliance with this policy include:

3.1 Procurement requirements and considerations

All procurements shall be conducted in a manner that provides, to the maximum extent practical, full, and open competition. All procurement shall avoid non-competitive practices that may restrict or eliminate competition, including but not limited to:

a) Unreasonable qualification requirements.
b) Unnecessary experience requirements.
c) Non-competitive pricing practices between firms of affiliated companies.
d) Non-competitive contracts to consultants on retainer contracts.
e) Specifying brand name instead of allowing an equal competition.

3.2 Authorised to procure

Authorisation of procurement can only be made by individuals within IPPF who are budget holders and have the delegated authority to commit IPPF to a liability on account of procurement of goods, works and services. These thresholds are already defined within the Delegation of Authority document.

3.3 Segregation of Duties

Separation of duties shall be applied as an internal control mechanism within each procurement process. It shall be applied to help reduce the exposure of inappropriate, unauthorised or unlawful expenditures and to increase integrity of the procurement process.

As part of this, all decision makers including if decision taken by a committee shall sign a disclosure regarding conflict of interest in relation to vendor/ supplier/ contractor/ consultant being shortlisted for selection before the said procurement is finalised.

3.4 Evaluation and Selection of Vendor

When evaluating quotations and deciding on selection of vendors, lowest price should not be the sole criteria especially in procurements where other factors are important to the decision such as quality, delivery timeline, etc. There should be an objective method for selection, and factors/ parameters for selection should be documented adequately supporting the principle of value for money decision making.

3.5 Procurement Documentation

The budget holder or the person delegated to undertake the procurement process (also referred to as the commissioning manager) must ensure that adequate documentation is compiled and retained on record to substantiate that this procurement policy has been complied with.

The documentation should maintain a complete audit trail including approvals, quotations, evaluation papers including a conflict-of-interest declaration form duly signed off by those taking the decision to procure, due diligence process undertaken and contracts (as per the requirement) along with the code of conduct duly signed off by the supplier/ vendor/ consultant/ contractor.

3.6 Contracts

There should be a written contract or document for all purchases as per the value and process specified in the procurement threshold limits highlighting the services, goods or works to be delivered and the fee expected to be paid for the same. This could include overall limits on days/ fee (as in a framework agreement) but at the minimum must specify the total maximum financial liability that IPPF is committing to.

Any exception to this requirement shall have to be justified in writing and approved by the relevant approval authority.
Framework agreements should be tested against the market at least once every 3 years if not earlier, dependant on the type of contract, as specified within the procurement manual.

4. Compliance with this policy

It is the responsibility of each, and every person involved in the procurement process to ensure compliance with this policy in its spirit and essence.

Overall, it is the responsibility of the procurement manager or the owner of this policy to ensure that the

a) this policy remains fully updated,
b) queries for procurement across all offices are responded to,
c) there is a designated custodian of procurement systems and processes and
d) oversight of procurement procedures performed across the secretariat is maintained.

Violation of this policy may result in disciplinary action, including termination of contract in case of significant breach.

5. Timeline for Policy Review

The Procurement Policy will be reviewed every two years.

6. Version Control

Version	Effective Date	Developed	Owner	Approved Date
Version No. 1	16 March 2024 [1]	30 January 2024	Director – Finance and Technology	15 Mar 2024

As adopted by IPPF Board of Trustees, March 2024

[1] Prior to this policy, there were two separate documents one on the procurement principles and the other on procurement procedures approved by the management in December 2014. These encapsulated the broad principles applicable to all the offices but provided the manual more for the London office, whereas some other offices had their own procurement manual.

4. SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

Policy 4.1

4.1 THE HUMAN RIGHT TO FAMILY PLANNING

1. It has been internationally agreed that the right of all individuals and couples to decide freely and responsibly the number and spacing of their children is a basic human right. The right to decide freely and responsibly also includes the right of individuals to have the necessary information, education and counselling on family planning, and the means to practice it.

2. Member Associations have a responsibility to actively promote, by means of advocacy and persuasion, that this freedom to choose is respected by the state and should do their utmost to educate individuals exercising the right to take into account the needs of their living and future children and their responsibilities to their community and to society at large.

3. Member Associations should ensure that the promotion of the right to and practice of family planning continues to receive the highest priority in their programmes.

As adopted by Central Council, November 1990

Policy 4.2

4.2 DELIVERY OF FAMILY PLANNING SERVICES

1. IPPF supports service delivery programmes which are directed towards those segments of the community which are most likely to be bypassed by the conventional facilities of governments.

2. High priority is given to programmes that serve the needs of the underprivileged in rural and peri-urban areas, the poor, the illiterate, minority groups, immigrants and young people in all countries and societies.

3. As a fundamental principle in both the provision of and advocacy for family planning services, Member Associations are urged to ensure the availability of all safe and effective methods of fertility regulation; campaign actively against any restrictions on any of these methods, and maintain a multi-faceted, accessible service delivery programme.

As adopted by Central Council, November 1990

Policy 4.3

4.3 INFORMED CHOICE

1. The right to ready access to family planning information, education and services must be accompanied by the right to make voluntary and informed choices on the methods of contraception available, be they temporary or permanent, traditional or modern. The right to accept or reject particular forms of contraception must be fully protected in all countries.

2. The exercise of both the right of access to family planning and the right to make informed and responsible decisions about childbearing requires full knowledge of the benefits, purposes and practice of family planning, and the personal, familial and societal consequences of individual reproductive behaviour.

As adopted by Central Council, November 1990

Policy 4.4

4.4 IPPF PUBLICATIONS

1. In furtherance of its aims and objectives, IPPF undertakes the publication of various documents and books, magazines, newsletters, brochures, etc., each of which adheres to and supports IPPF's policies and goals.

As adopted by Central Council, November 1990

Policy 4.5

4.5 WOMEN AND FAMILY PLANNING

1. IPPF upholds the principle that the attainment of real equality between the sexes is based on the empowerment of women to regulate their own fertility. Without the achievement of this basic freedom, within the sexual partnership, women are disadvantaged in their attempt to benefit from other social reforms.

2. The Federation therefore expects all its Member Associations to press for measures within their country which recognize the basic human right of women to decide the number and spacing of their children; provide for the constitutional recognition of the rights of women, and divert an equitable share of national resources into creating greater education and employment opportunities for women as a means of improving their status and creating a more favourable climate for the acceptance of family planning.

3. The Federation advocates that joint decision-making and shared responsibility by women and men be a goal in all its family planning programmes.

As adopted by Central Council, November 1990

Policy 4.6

4.6 MEN AND SEXUAL AND REPRODUCTIVE HEALTH

Introduction

1. IPPF is committed to working with men and boys as clients, partners and agents of change in our efforts to meet the goals and objectives of the Federation's Strategic Framework. This applies to males of all sexual orientations, including those who have sex with other men (homosexual, bisexual and transgender) and regardless of HIV status.

2. This policy reflects the importance the Federation attaches to addressing male sexual and reproductive health and rights, and the need to work with men and boys, together with women and girls, as equal partners in the provision of comprehensive sexual and reproductive health services. This is critical to meeting today's global public health challenges and is in line with the ICPD Program of Action, the Millennium Development Goals (MDGs) and a wide body of international research.

3. This policy builds upon existing programmes and initiatives within IPPF and provides guidance to volunteers and staff on where these may need to be developed or expanded. It outlines a number of steps to be undertaken by Member Associations and the IPPF Secretariat in order to implement services in line with this commitment. All policies and programmes within the Federation should be planned taking account of this policy and implemented and evaluated accordingly.

Men's role in Promoting Gender Equity in Health

4. IPPF believes that in order to address underlying power and gender imbalances, and their effects on health, it is essential to work with men in promoting gender equity. Strategies and programmes seeking to challenge the practices and structures creating gender inequalities should, therefore, explicitly engage men and highlight their positive and influential role. Such engagement should, at all times, enhance rather than diminish women's autonomy. IPPF undertakes, where possible, to:
   i. Promote gender equity as an issue of concern for men as well as women and highlight the benefits of a more equal society for everyone.
   ii. Work with positive male role models and undertake campaigns and educational programmes to empower men and boys to fully understand and promote gender equity and support the sexual and reproductive health and rights of others, in particular women and young people.
   iii. Work with both sexes to challenge often 'negative' gender norms/stereotypes, tackle homophobia, and promote more equitable ways of living and loving.
   iv. Work with women and girls to support the development of more equitable attitudes and behaviours amongst men and boys.

Reaching Boys and Young Men

5. IPPF is committed to reaching boys and young men, together with girls and young women[1], through comprehensive sexual and reproductive health information and services, to address the specific vulnerabilities and sexual and reproductive health needs of this group. The Federation also recognises the importance of early intervention to foster healthy sexual health attitudes and behaviours among boys and young men. The Federation undertakes, where possible, to:

   i. Address the specific needs of boys and young men within existing sexual and reproductive health programmes, clinics and youth friendly services.
   ii. Provide appropriate information, counselling and outreach that empower boys and young men to feel respected and confident in accessing support and using condoms.
   iii. Work with young men and boys through comprehensive sexuality education and peer education programmes to increase their life skills and understanding of personal health, equitable relationships and the negative impact of traditional gender stereotypes.

Men as Partners in preventing HIV and other Sexually Transmitted Infections

6. IPPF believes that the programmes and services of Member Associations should recognise the critical role that men and boys play as partners in addressing the HIV epidemic and preventing other Sexually Transmitted Infections (STIs) and seek to facilitate their involvement. IPPF undertakes, where possible, to:

   i. Increase male access to, and utilisation of, voluntary counselling and testing (VCT) services, and to increase their uptake of necessary treatment, care and support.
   ii. Advocate for the involvement of positive male role models (particularly those living with HIV) to encourage other men and boys to use condoms and be tested for HIV and STIs.
   iii. Address the sexual and reproductive health and positive prevention[2] needs of men living with HIV, their partners and family members, including providing support for men in serodiscordant relationships.
   iv. Support the involvement of male partners in the prevention of mother-to-child transmission (PMTCT).
   v. Involve men in strategies to reduce HIV and STI related stigma and discrimination.

Men as Partners in the provision of safe abortion services

7. IPPF acknowledges that men and boys have a role to play in increasing their partners' access to safe abortion services, thus contributing to a decline in maternal morbidity and mortality related to unsafe abortion. This approach to working with men and

[1] Boys, young men, girls and young women refer to those between the ages 10-24
[2] Positive prevention is defined as prevention for, and with, people living with HIV.

boys should, at all times, be underpinned by support for a woman's right to choose. The Federation undertakes, where possible, to:

i. Provide specific information and education for men on abortion and how to support interventions to increase access to safe abortion services.
ii. Work with men and boys to advocate for changes in legislation, to address stigma and discrimination, and to remove obstacles to accessing safe abortion services.
iii. Enable and encourage men and boys to participate in pre- and post-abortion counselling sessions, if a woman so desires.

Men as Partners in improving access to services

8. IPPF recognises the importance of working with men to reduce barriers and increase access to sexual and reproductive health information, sexuality education and high quality family planning services. This includes sensitising men to their responsibilities in promoting women and adolescents' sexual and reproductive health, well-being and rights. IPPF undertakes, where possible, to:

i. Strengthen information and education which promote male responsibility and the sexual and reproductive health needs and rights of women, men and adolescents.
ii. Work with men to encourage them to assume full responsibility for their sexual behaviour and to protect the health, well-being and rights of their partner and family.
iii. Promote joint decision-making and shared responsibility by men and women, particularly in relation to use of contraception and other safer sex techniques, within a gender equity framework.

Men as fathers

9. IPPF promotes the important role that men play as fathers. The Federation supports the development and promotion of gender equitable fatherhood and recognises the important role of fathers in safe motherhood and antenatal care, as well as in the promotion of women and adolescents' physical and psychological well-being. The Federation undertakes, where possible, to:

i. Provide specific support, education and information to fathers, and promote the role of responsible fathering in improving family health and reducing fatality risks pre and post child birth.
ii. Embrace fatherhood in its diversity of forms, recognising that working with men as parents provides an important opportunity to also address other sexual and reproductive health needs and issues.
iii. Provide support and counselling services to facilitate the greater sharing of family responsibilities and the concerns for pregnancy support.

Men as Partners in eliminating Gender Based Violence

10. The Federation is committed to involving men in the reduction of gender-based violence. The Federation believes that policies, programmes, services and campaigns

should explicitly highlight the role of men as part of the solution to addressing and preventing this violence. Such an approach should remain accountable to women and promote their empowerment. IPPF undertakes, where possible, to:

i. Highlight that violence against women also negatively impacts upon men and boys and their families, and that an end to such violence will bring benefits to everyone's health and wellbeing.
ii. Support men's anti-violence activism that demonstrates clear alignment with principles of gender equity.
iii. Promote violence prevention strategies which address the root causes and impacts of violence, including violence and abuse against men and boys, particularly in high-risk settings.

Men's Sexual and Reproductive Health Needs and Rights

11. The Federation is committed to ensuring that programmes and services also identify and address the sexual and reproductive health needs and rights of men and boys. IPPF believes that this is necessary both to improve the health of men and boys themselves, and as an important way of encouraging men to enhance the sexual and reproductive health of others, in particular women and young people. The Federation undertakes, where possible, to:

i. Create or expand programmes and services to specifically address men and boys' sexual health and reproductive needs and concerns.
ii. Review existing sexual and reproductive health policies, programmes and interventions to ensure that they actively promote the greater engagement of men and boys and facilitate their access to services.
iii. Promote the use of male role models to encourage other men to take greater care of their sexual and reproductive health.
iv. Enhance understanding among men of the sexual and reproductive health rights and needs of their partners, lovers and children.

POLICY IMPLEMENTATION

In line with this policy, the IPPF Secretariat and Member Associations are urged to raise awareness among volunteers and staff to develop their own appropriate strategies. More specifically:

12. Member Associations should endeavour to:

i. Integrate, based on the appropriate areas of this policy, a focus on working with men and boys, and addressing their sexual and reproductive health needs, within existing policies and programmes.
ii. Provide training and support to build the capacity, skills and attitudes of staff, service providers and peer educators to work with men and boys, particularly the most vulnerable.
iii. Create and maintain strategic partnerships with other organisations working with men and boys, including linkages to enable appropriate referrals.
iv. Work with parliamentarians and other decision-makers on this issue.
v. Use language that will not exclude men and boys from our work.

vi. Review and/or plan, implement and evaluate programmes and activities in line with this policy.

13. The London Office and Regional Offices will seek to:

i. Support development of these programmes and services and, where possible, provide Member Associations with technical support. The IPPF Central and Regional Offices will also endeavour to raise funds for the implementation, and scaling-up, of this work.
ii. Ensure that relevant IPPF standards and guidelines (clinical and non-clinical) reflect the above policy.
iii. Develop strategies, where possible, to integrate a stronger focus on men and boys within the Federation's core business, including a monitoring and evaluation and gender analysis framework for this aspect of the strategic framework.
iv. Establish and/or develop existing links with organisations working on this issue.

As adopted by Governing Council, May 2008

Policy 4.7

4.7 MEETING THE SEXUAL AND REPRODUCTIVE HEALTH RIGHTS OF YOUNG PEOPLE

Introduction

1. IPPF is committed to working for and with young people to ensure that they are supported and empowered in their decisions relating to sex and sexuality. IPPF believes young people who are fully informed about their sexual and reproductive health (SRH) choices grow into healthy individuals and have healthy fulfilling relationships. IPPF's Youth Manifesto and IPPF's Declaration for Sexual Rights provide a framework to respect, protect and fulfil young people's right to make autonomous decisions about their SRH in line with their evolving capacities. IPPF advocates for the eradication of barriers that inhibit access to comprehensive sexuality education (CSE), information and SRH services that respond to all young people's needs and realities[1].

Guiding principles

2. This policy provides a set of guiding principles that reflect the Federation's commitment to meeting and advancing the SRH needs and rights of young people and the actions necessary to realize this goal. These guiding principles include IPPF's and the MAs:

   i. Belief that young people with knowledge, confidence and comfort with their own bodies are better equipped to negotiate relationships, including any sexual relationships they may have. The policy also acknowledges the right of all young people to enjoy sex and express their sexuality in the way that they choose.

   ii. Commitment to empower young people, to give them confidence in themselves and to encourage them to know their rights, exercise their rights and respect the rights of others. A positive approach to sexuality is necessary in order to ensure young people's sexual and reproductive health and well-being.

   iii. Recognition of our role in investing in young people's engagement, to become advocates and proactive members within their communities concerning SRHR issues; to provide them opportunities to contribute to policy and programme development, implementation, monitoring and governance.

   iv. Recognition of the importance that young people's sexual and reproductive health programmes, including CSE, are placed in the context of their overall development and wellbeing. These should be aimed at enabling young people to take control over their own lives, to be empowered and resilient and foster self-reliance and independent thinking.

   v. Acknowledgment of the gender gap that hinders adolescent girls and young women from enjoying the same freedoms as adolescent boys and young men, making them especially vulnerable to various forms of discrimination and sexual and gender-based violence (SGBV). Young mothers are among those most powerless, and face pressures to bear children early despite the risks to their

[1] As outlined in Vision 2020

health, life and educational attainment. These inequalities early in life can contribute to poor health, economic insecurity and diminished quality of life.

vi. Recognition that while boys and young men may benefit from different freedoms to girls and young women, in many places the pressure to conform to gender norms makes them vulnerable to violence, dangerous risk-taking and accidental death, and keeps them from fulfilling their life's potential. IPPF promotes an approach that enlists boys and men as allies in the empowerment of girls and women, supports them to access services and seeks to transform gender norms in a way that improves health and life outcomes for all. Moreover, create a platform/empower boys and young men to take an action against gender-based discrimination and violence against girls and young women.

vii. Commitment to work towards removing all social, legal, administrative and institutional barriers that adversely affect young people's sexual and reproductive rights.

viii. Recognition of the diversity of young people's situations and a commitment to strive to ensure that their SRH needs are met, and that they are neither excluded nor restricted on any basis as outlined in the Framework of Non-Discrimination within IPPF's Declaration for Sexual Rights [2]. IPPF is committed to addressing the factors that render young people especially vulnerable to HIV, sexually transmitted infections (STIs), unwanted pregnancies and other sexual and reproductive health issues.

ix. Recognition that physical and mental well-being includes remaining free from all forms of sexual violence and coercion, and that IPPF and Member Associations should commit themselves to eliminating sexual and gender-based violence towards young people, including female genital mutilation (FGM) and early and forced marriage. Member Associations are encouraged to offer services for young survivors of violence and advocate on the issues of sexual and gender-based violence.

x. Will not tolerate any type of abuse or exploitation towards any child or young person and commits to ensuring that all staff, partners and associates are made aware of, and supported in their responsibilities to prevent abuse and protect children, young people and vulnerable adults.[3]

xi. Recognition of the role that information technology plays in young people's lives and is a key determinant of their wellbeing and mental health.

Implementation

3. The IPPF Secretariat should use all available mechanisms in the Federation to regularly monitor the implementation of this policy and report to the appropriate governing body. The implementation of this policy should be adequately resourced and supported by IPPF Senior Management Team.

4. To put this policy into action, the IPPF Secretariat and Member Associations should undertake actions that address the needs and rights of young people. These actions include; creating a supportive and enabling environment for young people to participate;

[2] See glossary
[3] See policy 1.15

promoting programmes and CSE that empower young people; especially those who are poor and vulnerable; and making efforts to advance their sexual and reproductive health and rights.

Participation

5. IPPF expects Member Associations to play a role in supporting young people to reach their full potential and ensure they receive practical skills and knowledge so they can participate to the best of their ability in society. IPPF and Member Associations should:

   i. Make efforts to actively recruit young people as volunteers and/or members of staff.

   ii. Ensure that young people have equal opportunity when applying for membership and or jobs and in any other aspect of work, subject to local law.

   iii. Involve young people in the design, implementation and evaluation of their programmes and services at every stage, and ensure they have real decision-making power.

   iv. Have at least twenty percent of their decision-making bodies made up of young people, in line with IPPF's Board of Trustees structure.

   v. Ensure the participation of young people is built around the equal partnership of young people and adults.

   vi. Ensure young people are supported to participate in all of the above through the provision of resources, (material and financial) mentoring, information and training.

Rights Based, Gender Sensitive Information and Comprehensive Sexuality Education

6. IPPF and Member Associations are urged to advocate for and provide both SRH information and comprehensive sexuality education (CSE) that enhances the independence and self-esteem of young people and provides them with the knowledge, skills and confidence to make informed choices. The following should be taken into account: [4]

   i. Information and CSE should be accessible to young people of all ages in accordance with their evolving capacities.

   ii. Information and CSE should be provided which enables young people to feel comfortable and confident about their bodies and their sexuality regardless of whether they are sexually active or not.

   CSE should be provided that helps young people acquire the skills to negotiate relationships and safer sexual practices, including whether and when to engage in sexual intercourse, as outlined in IPPF's CSE Framework[5].

   iii. CSE strategies that are gender equitable and inclusive, accessible and non-discriminatory are needed to address young people both in and out of school. Special attention should be paid to the most poor and vulnerable young people.

[4] See policy 4.8
[5] A Frameworks for Comprehensive Sexuality Education (Updated 2010)

Access to Youth Friendly Sexual and Reproductive Health Services

7. IPPF is committed to the provision and promotion of youth-friendly services which are easily available to all young people. Member Associations should ensure access to youth friendly services and advocate for their provision. The criteria for Youth friendliness includes:

   i. SRH services for young people that are accessible, stigma free and which assure privacy and confidentiality.

   ii. Trained staff members who treat young clients with respect, in a supportive and non-judgmental manner.

   iii. Special attention and specific approaches that meet the different needs of vulnerable young people such as the very young and those who identify as lesbian, gay, bisexual, transsexual and intersex.

   iv. Access to a full range of SRH services[6]

   v. Access to comprehensive safe abortion services, including counselling which is non-directive, non-judgmental and that are responsive to personal circumstances and cultural background.

   vi. Sensitive and supportive post abortion counselling and follow-up for young women. Contraceptive counselling and services should be made available to reduce the risk of further unwanted pregnancies.

[6] Integrated package of essential services (IPES)

Glossary

Adolescents/ Young People: In IPPF we use the following definitions based on the World Health Organisation's recognition:

- Adolescence is defined as 10 – 19
- Young People: 10-24 years

Comprehensive Sexuality Education (CSE): Education which is provided 'in' or 'out of school' settings, the IPPF Framework for Comprehensive Sexuality Education states: "Comprehensive Sexuality Education seeks to equip young people with the knowledge, skills, attitudes and values they need to determine and enjoy their sexuality – physically and emotionally, individually and in relationships. It views 'sexuality' holistically and within the context of emotional and social development. It recognizes that information alone is not enough. Young people need to be given the opportunity to acquire essential life skills and develop positive attitudes and values."

Empowerment: Empowerment is based on the idea that giving people the knowledge, skills, authority and opportunity as well holding them responsible and accountable for outcomes of their actions, will contribute to them becoming more motivated and competent to take control of their lives.

Framework of Non-Discrimination within IPPF's Declaration for Sexual Rights: prohibits any distinction, exclusion or restriction on the basis of sex, age, gender, gender identity, sexual orientation, marital status, sexual history or behaviour, real or imputed, race, colour, ethnicity, language, religion, political or other opinion, national or social origin, property, birth, physical or mental disability, health status, including HIV/AIDS, and civil, political, social or other status which has the purpose or effect of impairing or nullifying the recognition, enjoyment or exercise on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field.

Participation: IPPF used a model of youth participation whereby young people can critically explore programmes and policies, can identify possibilities for change and have genuine influence.

Youth-friendly: IPPF's Medical Advisory Panel describes youth friendly services as follows: 'They are able to effectively attract young people, responsively meet their needs, and succeed in retaining these young clients for continuing care. Youth friendly services should offer a wide range of SRH services relevant to adolescents' needs.

As adopted by Central Council, November 1990
Last Amended November 2014

Policy 4.8

4.8 COMPREHENSIVE SEXUALITY EDUCATION

1. IPPF acknowledges the importance of young people's access to Comprehensive Sexuality Education (CSE), both within formal and informal settings. IPPF urges MAs to promote a model of sexuality education that is rights-based and gender-sensitive and that considers the various socio-cultural, economic and power dynamics that influence sexual choices as well as the resulting emotional, mental, physical and social impacts on each young person's development.

2. The provision of CSE in IPPF should use a model of learning that takes a positive and respectful approach to sexuality and sexual relationships for young people, whether or not they are sexually active. A holistic, community-based approach with a focus on participatory learning is preferred, and the environment within which it is provided should encourage critical thinking about gender equity and rights.

3. CSE should equip people with the information and life skills they need to make informed decisions and enjoy a healthy, pleasurable sexual life free from unwanted pregnancy, STIs, HIV and AIDS and sexual violence.

4. Comprehensive sexuality education programmes should be closely linked to and mutually reinforced by youth-friendly sexual and reproductive health service provision.

As adopted by Central Council, November 1990
Last amended by Governing Council, May 2011

Policy 4.9

4.9 INTEGRATION OF FAMILY PLANNING WITH DEVELOPMENT

1. IPPF adheres to a principle of development that strives for equity and social justice. IPPF advocates development policies and programmes that are dedicated to meeting the basic needs particularly of the deprived and under-privileged and in general to improving the quality of life.

2. IPPF works to increase public and government awareness of the interrelationships between population, development, resources and the environment, supports long-term, multi-faceted population policies to be implemented together with relevant services and education programmes as integral components of national and international development plans.

3. IPPF contends that, when a society faces many urgent development problems it is essential to adopt a caring attitude to the family and the community as a whole and not deal with family size alone. Although recognizing the mutually reinforcing relationships between family planning and other aspects of development, IPPF concentrates on those aspects which are most closely related to its own area of work and expertise.

4. IPPF does not adhere to a single model for the integration of family planning with development but maintains that the service structure should be viable, collaborative, participatory and designed to benefit all groups in the community.

5. IPPF funding of integrated programmes will be primarily for the family planning component, and should, if possible, be combined with funding from other sources. Following specific criteria to be developed, provision may be made for funding of other activities when they are deemed necessary in order to accomplish family planning objectives.

As adopted by Central Council, November 1990

Policy 4.10

4.10 MONITORING AND EVALUATION

Introduction

1. The most important work of IPPF takes place at the country level where Member Associations advocate to their governments and serve their clients through the implementation of sexual and reproductive health and rights programmes.
2. This policy makes clear the importance that the Federation attaches to the monitoring, evaluation[1], learning and sharing of its work, and highlights key principles and commitments that volunteers and staff should be guided by in its implementation.
3. The Federation recognizes shared values and responsibilities across the whole organization, while also noting that separate duties and abilities apply to different levels.

Principles

4. Organizational effectiveness in IPPF means the ability of the Federation to fulfil its mission through a combination of sound management, good governance and a persistent dedication to achieving results.
5. Monitoring, evaluation, learning and sharing:
   i. are integral to organizational effectiveness since they are concerned with measuring results achieved, and analysing and reflecting upon the process that led to those results in ways that enable continuous improvement
   ii. should be carried out at and be useful for all levels of the Federation
   iii. empower volunteers and staff to understand what works well and not so well, to improve policy, plans, programmes and projects, and to inform the design of new ones
   iv. lead to high quality reporting on the performance of the Federation, which increases accountability to those we serve (our clients) and to those who support our work (our donors and all other partners) and to ourselves

Commitments

6. IPPF is therefore committed to:
   i. providing support to volunteers and staff to increase their monitoring and evaluation skills and improve decision making
   ii. implementing a participatory approach to monitoring and evaluation in which key people who have a concern and interest in a programme or project are actively and meaningfully involved in its evaluation

[1] Monitoring is the ongoing collection and analysis of data to review progress and make adjustments where necessary. Evaluation is the assessment of results achieved.

iii. monitoring and reporting on results to assess whether or not the Federation is achieving its strategic goals and objectives

iv. recommending changes and required interventions based on the results and findings

v. demonstrating the effects of the Federation's work at national, regional and global levels in ways that are convincing, easy to understand and intellectually honest, following standard ethical considerations and codes of conduct in the evaluation practices

Implementation

To realise these principles and commitments:

7. Governing bodies will:

   i. ensure that IPPF's Monitoring and Evaluation Policy remains relevant and is implemented

   ii. ensure that management has included budgetary allocation for monitoring, evaluation and learning in Annual Programme Budgets

   iii. monitor, challenge and support the work of IPPF by reviewing performance data and monitoring progress in implementing strategic plans

8. The Director General, Regional Directors and the Executive Directors of Member Associations will ensure that:

   i. resources are available to undertake ongoing monitoring and evaluation of programmes and projects

   ii. systems and procedures are in place (with continual update and improvement) to undertake monitoring and evaluation of programmes and projects

   iii. programme and resource allocation decisions are based on analyses of both performance and needs

   iv. IPPF's governing bodies at all levels of the Federation are provided with the evidence they need to monitor IPPF's performance, and to challenge and support the work of IPPF

   v. monitoring and evaluation practices are aligned with accreditation standards wherever relevant

9. Member Associations will plan and implement ongoing, participatory and robust monitoring and evaluation practices, with indicators of performance, to ensure project, programme and organizational effectiveness. They will:

   i. have rigorous monitoring and evaluation plans with indicators of performance

   ii. implement practices that encourage all relevant volunteers and staff to review, analyse, reflect upon and make decisions based on data

   iii. conduct needs assessments[2]

   iv. conduct baseline, midterm and endline/end-of-project surveys

   v. disseminate and share results

[2] A needs assessment is a tool for project designing and planning which should be conducted before the logical framework is finalized. It is used to identify the needs of the target community and the programme strategies and activities that are best suited to meet the needs.

10. Regional Offices will:
    i. support Member Associations to monitor and evaluate their work. This will involve the provision of technical assistance, capacity building and systems support on monitoring, evaluation, learning and reporting
    ii. measure regional performance and progress of Member Associations
11. The Secretariat, working in their respective roles, will:
    i. facilitate collaboration and sharing across the Federation of monitoring and evaluation best practices
    ii. facilitate development of standardized methodologies and tools for monitoring and evaluation
    iii. ensure maximum use of data for data-driven decision making
    iv. ensure that resources are allocated to support best practices in monitoring and evaluation, including integration into global resource mobilization efforts
    v. ensure effective global systems for data capture, analysis and interpretation are in place and continually improved
    vi. develop guidelines and procedures on monitoring and evaluation
    vii. support evaluation capacity building to ensure the quality of evaluation throughout the Federation
    viii. measure progress in implementing IPPF's Strategic Framework by analysing data on the Federation's global performance indicators
    ix. supplement global performance data with in-depth programme reviews and evaluations
12. Performance results and evaluation findings will be made available on IPPF websites (global and regional) and IPPF Exchange to:
    i. share lessons learned and good practice globally, both within and beyond the Federation
    ii. raise the profile of the Federation by demonstrating results and being open and transparent

As adopted by Central Council, November 1990
Last amended by Governing Council, May 2014

Policy 4.11

4.11 ETHICAL, EFFICIENT AND EFFECTIVE HEALTH INFORMATION SYSTEMS

INTRODUCTION

1. IPPF Secretariat and Member Associations have an obligation to ensure that ethical, efficient and effective health information systems are in place to collect, store and manage clients' information across the Federation. This is important in achieving IPPF's Strategic Framework outcomes to promote and encourage strong health information systems management.
2. IPPF believes that a strengthened system of collecting health information helps to protect organizations from legal and ethical implications of sensitive information misuse and enables a stronger and more efficient structure of data collecting and management.
3. IPPF upholds the responsibility to support a culture of performance, efficiency, effectiveness and accountability, and to ensure non-judgemental, good quality of care for clients across all age groups, sexual orientations, gender identities and recognizes the need for reliable, safe, client-centred and efficient health information systems.
4. IPPF acknowledges the obligation to ensure that the data reported through health information systems are accessed and utilized appropriately, by the authorised users and meeting the recognized international standards of confidentiality.
5. IPPF's Strategic Framework Outcome 4 refers to a high performing, accountable and united Federation with strengthened systems across the Federation to support a culture of performance, efficiency, effectiveness and accountability (Deliverable 4.1). It is therefore important to set guidelines on how or whether this information is collected, stored, shared and protected from unfair and illegal use.
6. There is a strong research and theoretical body of evidence to demonstrate that strong health systems are central to achieving better health outcomes, and strong health information systems (HIS) are the backbone of strong health systems. A properly functioning HIS gets the right information into the right hands at the right time, enabling policymakers, managers, and individual service providers to make informed choices about everything from patient care to national budgets. Strong health information systems support greater transparency and accountability by increasing access to information.[1]
7. According to the World Health Organization (WHO), health information systems serve multiple users and a wide array of purposes that can be summarized as the generation of information to enable decision-makers at all levels of the health system to identify problems and needs, make evidence-based decisions on health policy and allocate scarce resources optimally.[2]
8. As outlined in the UNHCR Health Information Systems Toolkit, health information systems are key to rapidly detect and respond to health problems and epidemics in humanitarian settings, monitor trends in health status and continually address health-care priorities, evaluate the effectiveness of interventions and service coverage. It also ensures that resources are correctly targeted to areas and groups

[1] MEASURE Evaluation HIS: https://www.measureevaluation.org/our-work/health-information-systems
[2] Health Metrics Network Framework and Standards for Country Health Information Systems, Geneva, World Health Organization, 2008 available at http://www.who.int/healthinfo/statistics/toolkit_hss/EN_PDF_Toolkit_HSS_InformationSystems.pdf

of greatest need and thus evaluates the quality of health interventions to inform decision makers.[3]

9. Regional regulations highlight individuals' right to privacy, access to personal data and the consent for data use as extremely important issues while developing a health information system. These were carefully considered and embedded into this policy.

PURPOSE AND SCOPE

10. The purpose of this policy is to provide guidelines to IPPF Secretariat and Member Associations to (i) develop and use ethical, efficient and effective health information systems and (ii) collect, store, manage and protect clients' health information, irrespective of whether there is or not yet a formal health information system or data management platform in place.
11. This policy applies to all staff and volunteers of IPPF Secretariat and Member Associations.

CORE PRINCIPLES

12. **IPPF Member Associations and Secretariat will:**
    a. uphold clients' right to privacy and ensure clients' access to their own information within a premise of ethical service provision
    b. ensure limited and ethical access to clients' health records and information only for the appropriate and authorised staff[4] accountable and responsible for use of such information[5]. This will include a process of ensuring appropriate considerations of anonymity, confidentiality and of obtaining informed and formal consent from clients to use their data for monitoring, evaluation, research and documentation purposes, where applicable
    c. ensure that ALL individual clients' information as well as aggregated data are used fairly and lawfully for limited, specifically stated purposes and are kept safe and secure
    d. promote complete, accurate and timely data entry as well as meaningful analyses and dissemination of data for critical thinking and evidence-based decision making. Ensure the understanding of the difference between personal, identifiable client records/information and aggregated, de-identified, anonymized data that are sufficient for decision making while protecting the clients' identities and personal health records
    e. maintain agreed standards[6] regarding the storage, backup, confidentiality and security of health records and information at all levels of the Federation
    f. support ethical data management and data utilization, including data-driven decision making at all levels of the Federation
    g. treat any information relating to health information of clients responsibly and ethically.

[3] Health Information System (HIS) Toolkit, United Nations High Commissioner for Refugees (UNHCR), January 2010 available at http://www.unhcr.org/46385bc12.html
[4] Including Health care professionals and clinic administrative staff responsible for managing records and coordinating/supervising service delivery.
[5] Where possible, staff will require to sign confidentiality statements.
[6] See Annex for explanation and examples

IMPLEMENTATION AND COMPLIANCE

13. **IPPF Member Associations and Secretariat will:**
    a. work towards standardization and harmonization of Health Information Systems across the Federation to capture data related to service provision including client-based information, that respect international standards and/or national laws whichever are more progressive and aligned with IPPF's values
    b. make the policy widely available to all new and existing staff and volunteers and ensure its compliance
    c. support the policy implementation with adequate budgetary allocation
    d. train and build capacity of staff and volunteers to better understand and implement the policy
    e. support the integration and interoperability of local, regional and global health information systems within the Federation as well as with national health information systems, where applicable
    f. encourage the volunteers and staff to reflect upon the Federation's performance based on the data generated from the health information systems.
14. The Secretariat, in their respective roles will facilitate collaboration and sharing of best practices; ensure support for capacity building and promote data-driven decision making across the Federation.

Annex: GLOSSARY OF TERMS

1. **Health Information Systems:** Integrated and aggregated data collection, processing, reporting and use of the information necessary for improving client care, health service effectiveness and efficiency through better management at all levels (WHO).

   For IPPF, Health Information Systems are the data management platforms used to systematically collate, analyse and use data related to service provision. It includes client-based information that is essential to client-centred care.

2. **Clinic Management Information Systems:** Clinic Management Information Systems (CMIS) refers to manual (paper based) or electronic processes that capture and manage client data pertaining to: identity, demographics, medical, financial, contraceptive, risk screening, and pharmaceutical data in clinical and outreach settings. CMIS manage both personal identity and health data that is considered protected, private and confidential in practice management (e-PM) and health record systems (e-HR).

3. **Fair use of information:** Using information according to the best practice guidelines set by the organization, for the sole purpose of organizational needs. At no point confidentiality and anonymity of the clients are compromised by anyone. Routine practices are taken to ensure that data are protected from external threats (e.g. hacking) and malicious uses.

4. **Health care professionals:** those directly involved in care for and counselling of clients, including doctors, nurses, certified social workers, and psychologists, as well as medical supervisors and clinical coordinators of client care.

5. **Agreed standards** (regarding the storage, backup, confidentiality and security of health records) are applicable (but not limited) to all services and products provided to a client, including counselling services. A principal use of the health record is to support delivery of high-quality coordinated care and follow up for better health outcomes. This is possible where the health record is comprehensive, complete, and up to date.

   For example, where information is required for insurance claims or government reports, information should be transmitted securely, and client identity protected. The rule of minimum necessary should be applied when providing access to health information.

   Standards upheld by IPPF include the following:

   1) Clients' right to receive a copy of their health record or report of visit findings.
   2) Only de-identified client data may be accessed for research or performance reporting. Analysis tools may connect to data warehouse, but not directly to any clinical database.
   3) All services and products provided to a client (including counselling services) as well as diagnostic test results should be recorded in comprehensive, confidential client health record, whether electronic or paper. (This would address the practice of providers using shadow systems (like personal notebooks for service logs) leaving the health record incomplete for follow up)
   4) Best practices should be followed with respect to information security, where clinic data bases are backed up, encrypted and access control limited.
   5) Associations should have a policy for retention and destruction of client health information that is consistent with best practice and international standards.

These standards will include best practices with respect to the following security goals[7]:

a) Establishment of strong access control policies, management of user access, application of the minimum necessary rule, and routine monitoring of system security.
b) Education, training and awareness of health information security procedures and policies among clinic staff and across organization.
c) Encryption of all protected personal and health information archived, in active databases, and during transfer.
d) Audit logs periodically reviewed to identify unauthorized changes or access to protected health information. Any security incident is documented in incident log, with corrective action and outcome.
e) Client electronic health records may not be overwritten; corrections represent an amendment, added to the original recorded.
f) Guidance on retention, archival, purging/destruction of health records consistent with best practice, national laws and regulations.
g) Data analysis tools will not connect directly to clinical databases revealing identify of client and related health information. Where required for evaluation & research, de-identified & anonymized client data may be written to a data warehouses for analysis purposes.

As approved by the Governing Council, November 2017

[7] ISO 27799, ISO EN 13606 as cited in "Security and privacy in electronic health records: A systematic literature review", Journal of Biomedical Informatics, January 8, 2013, page 543

Policy 4.12

4.12 MEMBER ASSOCIATION/GOVERNMENT RELATIONS

1. A population policy is the prerogative of governments. IPPF maintains that the participation of broad-based Member Associations is valuable to governments in the formulation of such a policy.

2. IPPF maintains that national governments should have primary responsibility for providing family planning services. This responsibility should not lead to a diminished role for the Member Associations.

3. Member Associations can complement the role of government by developing innovative approaches to service delivery and by undertaking work in areas that the government may be unable or unwilling to enter.

As adopted by Central Council, November 1990

Policy 4.13

4.13 RELATIONS WITH OTHER ORGANISATIONS

1. In pursuit of its aims and objectives, it is IPPF's policy to build and strengthen relationships with groups and organisations with similar objectives. These initiatives are to be undertaken at the international, regional and Member Association levels.

As adopted by Central Council, November 1990

Policy 4.14

4.14 CONTRACEPTIVE SERVICES

1. It is IPPF's policy to offer only contraceptives which have been approved by its International Medical Advisory Panel (IMAP) as safe and effective and which meet national and/or international standards of quality.

2. IMAP keeps under continuous surveillance the already approved contraceptive methods and new methods that are being developed and reserves the right to update and modify its statements, and/or make new statements, according to the latest available information.

3. IPPF believes that as broad a choice of methods as possible should be made available to contraceptive users. Clients should be provided with their chosen method on condition that they have been given counselling and adequate information to enable them to make such a decision and that they have no medical contra-indications to its use.

4. The introduction of new methods should be preceded by the training of health workers, infrastructure support, and, where needed, the provision of back-up and referral facilities.

5. Member Associations should explore and advocate different approaches for service delivery (e.g. clinical and community-based services) and all possible means of maximizing the potential of all health personnel, including community health workers and traditional health workers.

> *When providing contraceptive services, the recommendations of IPPF's International Medical Advisory Panel (IMAP) should be followed. They appear in its various statements on methods of contraception and the statements on 'The role of health personnel in family planning services', 'Community family planning services (CFPS)', 'Breast feeding, fertility and post-partum contraception', 'Contraception for women over 35' and 'Contraception for clients who are HIV positive', 'Contraception for Women with Medical Disorders', 'Contraception for Adolescents', 'Contraceptive Efficacy' and 'Contraceptive Counselling'*.

As adopted by Central Council, November 1990
Last amended by Governing Council, November 2000

Policy 4.15

4.15 REPRODUCTIVE HEALTH

Policy 4.15.1

REPRODUCTIVE HEALTH

4.15.1 Infertility

1. The IPPF believes that the concepts of reproductive health and reproductive rights include concern for individuals and couples who are unable to have children when they so wish.

2. Member Associations have a responsibility for education in the prevention of infertility and for promoting programmes which prevent infertility including: the control of STDs, better obstetric care and the prevention of unsafe abortion. Member Associations should assist infertile clients in obtaining counselling and appropriate treatment, either in their clinical facilities or through referral.

> *The recommendations of IPPF's International Medical Advisory Panel (IMAP) in its statement on 'Infertility' should be followed when working in this field.*

As adopted by Central Council, November 1990

Policy 4.15.2

REPRODUCTIVE HEALTH

4.15.2 Diagnosis of Pregnancy

1. Member Association clinics should offer clinical and/or biochemical pregnancy diagnosis and counselling to any woman in need, whether or not she is a registered client of the clinic.

> *The recommendation of IPPF's International Medical Advisory Panel (IMAP) in its statement 'Diagnosis of pregnancy' should be followed when providing these services.*

As adopted by Central Council, November 1990

Policy 4.15.3

REPRODUCTIVE HEALTH

4.15.3 Linking HIV and Sexual and Reproductive Health and Rights

Introduction

1. HIV is the pre-eminent health, social and human rights issue of our time, which threatens the survival of individuals, communities and nations. With the adoption of the new strategic framework IPPF renewed its commitment to ensuring that addressing HIV is clearly part of a comprehensive response to the sexual and reproductive health and rights challenges of the day. As a key signatory to the *Code of Good Practice for NGO's Responding to HIV* IPPF's response finds resonance with these guiding principles.
2. Overwhelmingly, the main transmission route of HIV is sexual. As such, the links to broader sexual and reproductive health and rights issues and the inherent value of linking HIV responses to a comprehensive sexual and reproductive health (SRH) response cannot be underestimated. IPPF has committed to integrating comprehensive HIV services into its existing sexual and reproductive health (SRH) services. Linking HIV with our SRH policies, programmes and services enables us to meet some of the main challenges of HIV *and* address poor sexual and reproductive health.
3. The rapid spread of HIV infringes the human rights of men, women, adolescents and children and affects them in various ways, especially those who are at greatest risk or most vulnerable. Risk is defined as the probability or likelihood that a person may become infected with HIV. Certain behaviours create, increase, and perpetuate risk. Examples include unprotected sex with a partner whose HIV status is unknown, multiple sexual partnerships involving unprotected sex, and injecting drug use with contaminated needles and syringes. Vulnerability results from a range of factors outside the control of the individual that reduce the ability of individuals and communities to avoid HIV risk. A combination of these individual and structural factors may include: 1) lack of knowledge and skills required to protect oneself and others; 2) factors pertaining to the quality and coverage of health and other services (e.g. inaccessibility of service due to distance, cost or other factors); and 3) societal factors such as human rights violations, or social and cultural norms.
4. In many regions, key populations (such as men who have sex with men (MSM), sex workers and people who use drugs) are those who are most vulnerable to HIV. IPPF works from an evidence and rights–based approach to meet the sexual and reproductive health needs of all, including key populations. IPPF believes that all people should have the right to a full and satisfying life in which each person is able to develop to his or her full human potential.
5. The success of HIV prevention, treatment, care and support programmes ('prevention to care continuum') depends, in large part, on the creation of an enabling environment where individuals live free from stigma and discrimination; and have the capacity, skills, and opportunities to meaningfully make the decisions that affect their sexual and reproductive lives and wellbeing. An enabling environment facilitates behaviour change to reduce HIV transmission and promotes the quality of life for

people living with HIV and their families. IPPF encourages all Member Associations to review the situation in their countries with regard to HIV and to formulate a strategy which emphasizes various entry points for linking its HIV and SRH response along this prevention to care continuum. The main HIV related services along this continuum include:

a. Information, Education and Communication (IEC) / Behaviour Change Communication (BCC) materials
b. Condom distribution
c. STI management
d. Voluntary Counselling and Testing (VCT) services
e. Psychosocial support and counselling
f. Prevention of Mother to Child Transmission (PMTCT)
g. Treatment of opportunistic infections
h. Antiretroviral treatment (ART)
i. Palliative care

6. As an employer IPPF will uphold the values of inclusion and diversity that it promotes through an HIV workplace policy. HIV workplace policies are crucial in supporting staff living with HIV and AIDS. They facilitate a caring and supportive work environment for staff living with or affected by HIV. Programmes to support staff should aim to eliminate stigma and discrimination in the workplace on the basis of real or perceived HIV status, or vulnerability to HIV infection. These programmes should ensure that all staff are provided with basic information on HIV and AIDS, including: prevention; management of HIV infection; universal precautions; legal and ethical issues; gender and sexuality; stigma and discrimination; and treatment, care and support. The policy should adhere to International Labour Organization (ILO) guidelines. As an accreditation requirement, all Member Associations need to develop and implement their own HIV workplace policy and programme.

Advocacy

As a learning organization IPPF is committed to ensuring its response to HIV is informed by the best evidence and not by ideology. IPPF supports evidence-informed broad-based and comprehensive prevention programmes. These should be based on the concept of 'knowing your epidemic' and address the particular needs of young people.

7. Advocacy should be carried out at all levels of the Federation to campaign for legislative and policy change against laws that are ideologically and not evidence-based. National and international laws and policies should respect, protect and fulfil the rights of all, especially young women and girls and key populations. Advocacy work will be carried out with local, national and international partners to change discriminatory and damaging customs, laws and policies. In all its work, IPPF will promote and promulgate the IPPF Charter on Sexual and Reproductive Rights and the IPPF Sexual Rights Declaration.

8. Stigma, and its resulting discrimination, is the greatest hurdle to achieving HIV treatment and prevention goals. Stigma and discrimination, or even the fear of them, can prevent people from being open about their status and inhibit their access to services. IPPF supports steps to overcome stigma and mitigate discrimination. This includes legislation that outlaws discrimination based on HIV status. In particular, IPPF does not support the application of criminal law to prosecute HIV transmission

or exposure to another person. Education and awareness raising programmes that ensure communities are supportive of the rights of people living with HIV (PLHIV) are important, as are workplace policies to ensure the protection of PLHIV at work. Reducing stigma and discrimination means facing and talking openly about issues and behaviours that are all too often silenced or taboo, such as sex, sexuality, drug use, sex work, gender inequality, poverty, ethnicity and race. IPPF, working at the local, national, regional and international levels, will address key topical human rights issues and advocate for an end to HIV-related stigma and discrimination.

Partnerships

9. IPPF and its Member Associations should make every possible effort to communicate and collaborate with governmental, non-governmental, United Nations organizations, and other groups such as the private sector, professional groups and community based organizations, in order to facilitate a coordinated response to HIV.

10. IPPF urges Member Associations to build effective coalitions with local and national groups working on different aspects of HIV prevention, treatment, care, stigma reduction, tuberculosis, and harm reduction to maximise the social and public health impact of their work.

11. Strengthened efforts should be made at all levels of the Federation to partner and work closely with local, national, regional and international networks of people living with HIV.

Working from a rights-based approach for:

a) Gender

12. IPPF aims to secure the freedom, well-being and dignity of all people everywhere, within a framework of essential standards, principles, duties and obligations. In addition to this, our clients and stakeholders are not solely the recipients of services that respect their individual rights, but also have the right to influence and shape how we as a Federation respond to the HIV epidemic.

13. Member Associations should develop gender-transformative programmes that take into account the factors that increase the vulnerability of women, especially young women and girls, to HIV and other STIs. Reproductive health programmes should also engage men particularly through community and workplace activities, as they are critical to HIV and STI prevention. Programmes directed to reduce risk behaviour among men will benefit their female partners as well. The five key principles of gender-transformative programming are to:

    a. build equitable social norms and structures;
    b. advance individual gender-equitable behaviour;
    c. transform gender roles;
    d. create more gender-equitable relationships; and
    e. advocate for policy and legislative change to support equitable social systems.

14. IPPF maintains a wide definition of gender and actively seeks to address gender discrimination in order to guarantee equal access to HIV services for all, including women and girls, men and boys, lesbians, gays, bisexuals and transgenders.

b) People living with HIV

15. Promoting and addressing the sexual and reproductive health and rights of PLHIV is part of IPPF's core response. These should be based on the right of PLHIV to have a full and satisfying sexual life where the fertility choices and desires of HIV positive people are respected. In particular IPPF will support all efforts to address the stigma and discrimination faced by PLHIV

16. IPPF believes that all organizations need the active participation of PLHIV to both empower individuals and ensure that the response to HIV is relevant, effective and based on the realities of the pandemic. In line with the Greater Involvement of People Living with HIV and AIDS (GIPA) principle, PLHIV should have roles across the Federation and not simply as peer educators. IPPF actively encourages people living with HIV to work and volunteer across all levels in the Member Associations, and the secretariat.

c) Young People

17. Member Associations should recognise that adolescents face special difficulties accessing sexual and reproductive health services. MAs should therefore develop youth friendly services to make such services more accessible and acceptable.

18. IPPF believes that young people have the right to Comprehensive Sexuality Education (CSE). CSE seeks to equip young people with the knowledge, skills, attitudes and values they need to determine and enjoy their sexuality – physically and emotionally, individually and in relationships. CSE should cover a broad range of issues relating to both the physical and biological aspects of sexuality, and the emotional and social aspects. It recognizes and accepts *all* people as sexual beings and is concerned with more than just the prevention of disease or pregnancy. There are many opportunities for delivering sexuality education outside the formal classroom and traditional health service settings. These include delivering sexuality education in waiting areas and youth clubs, through hairdressing salons and taxi drivers, through community drama and media events and by incorporating CSE into traditional rituals. Member Associations should put mechanisms in place to increase access to CSE.

d) Key Populations

19. Key populations often have limited access to sexual and reproductive health services and information. Member Associations need to make sexual and reproductive health services available and accessible to these populations. Specific services include (but not exclusively):

    a. Men who have sex with men: Provision of suitable condoms and lubricants; STI management
    b. Sex Workers: Accept sex workers for their choice of employment and provide condoms and training to reduce the likelihood of gender-based violence.
    c. People who use drugs: Availability of harm reduction measures (e.g. clean needles, opiate substitution treatment); provision of condoms; and access to sexual and reproductive health services.

20. The stigma surrounding HIV frequently overlaps with the stigma faced by certain key populations, making it increasingly difficult to protect the sexual and reproductive

health and rights of those at the forefront of the epidemic. This double stigma faced especially by people living with HIV who are sex workers, men who have sex with men, and people who use drugs, is exacerbated by the absence of policies that protect their rights, thus making access to services a greater challenge. Member Associations need to be sensitive to the risk of further stigmatising already vulnerable populations by educating and sensitising their own staff and volunteers to not have stigmatising attitudes towards these populations.

Working along the prevention to care service continuum

21. A comprehensive approach to sexual and reproductive health and rights requires linking HIV prevention, treatment and care in a seamless service continuum.
22. The integration of different kinds of services (including referrals) maximises collective outcomes and is based on the need to offer comprehensive services
23. HIV prevention must be one of the key elements of any response to the epidemic. Prevention is an integral part of furthering treatment goals, and therefore it must form part of a continuum of care including treatment and support. In addition, prevention information and messages must be linked to appropriate services.
24. A comprehensive sexual and reproductive health response to HIV necessitates the natural integration of HIV treatment, care and support services. HIV treatment is an important step in enabling individuals, and their families and communities to lead normal healthy lives. HIV treatment reduces an individual's ability to transmit HIV and so is also an important prevention strategy.
25. *IEC/BCC materials:* Member Associations should provide information and educational materials in a variety of forms and settings to promote safer sexual behaviour and give all clients the means to make responsible decisions about their sexual and reproductive health and choices. These activities should motivate people to adopt new attitudes and less risky behaviour but should be carried out in a sensitive, non-stigmatising and human rights friendly manner.
26. *Condom distribution:* Member Associations should vigorously promote the use of the condom for the prevention of HIV and other STIs, also noting its value for dual protection, i.e. protecting against unwanted pregnancies at the same time as protecting against STIs. Where possible every effort must be made to ensure that male and female condoms are available to all free of charge, regardless of social status or background in all health facilities as well as the workplace and appropriate centres of education. Their availability should be linked to information and demonstration programmes to ensure their correct and consistent use.
27. *STI management:* Member Associations should integrate the management of other STIs into their sexual and reproductive health services.
28. *VCT services:* Learning your HIV status is crucial as it forms the gateway to services and information that can lead to HIV prevention, care, treatment and support. IPPF supports HIV testing that is based on the principles of the '3Cs':
    a. Consent – people should be tested only with their informed, voluntary and specific consent.
    b. Counselling – counselling should be provided before and after HIV testing.

c. Confidentiality – HIV testing should only occur when confidentiality of results can be guaranteed.

Where VCT is provided by Member Associations it must be linked to integrated HIV services or a strong referral system.

29. *Psychosocial support and counselling:* Following VCT services, clients should not be forced to disclose their status. If people choose to disclose their status psychosocial support and counselling should be available to support this. If counselling is not available, there must be a facilitated referral system in place so clients can receive these services.

30. *PMTCT:* Member Associations should advise pregnant women who do not know their HIV status about the importance of being tested. Member Associations should ensure that VCT, post-test counselling, psychosocial support, and access to treatment is available either through their own services or through facilitated referrals to other institutions. PMTCT services should cover all four prongs of a comprehensive PMTCT strategy, namely:

(i) primary prevention of HIV infection among women of childbearing age;
(ii) preventing unintended pregnancies among women living with HIV;
(iii) preventing HIV transmission from a woman living with HIV to her infant; and
(iv) providing appropriate treatment, care and support to mothers living with HIV and their children and families.

31. *Treatment of opportunistic infections:* IPPF should work in close partnership with international organisations, governments and country-based non-governmental institutions to campaign and negotiate for the increased availability of necessary drugs to treat the opportunistic infections related to HIV. At the service delivery level, MAs need to stock these drugs and provide treatment for opportunistic infections and other common HIV co-infections such as malaria, tuberculosis and Hepatitis C. Most of these infections can be treated at the health facility and all service delivery points should be equipped to diagnose and treat these infections or have a well-established referral network to ensure rapid access to and utilization of this service. Member Associations should monitor regularly the quality of the referral system and ensure HIV positive people receive the care and treatment they need in a timely and appropriate manner.

32. *Antiretroviral treatment:* International agreements recognize the need to secure universal access to HIV treatment services. Ensuring these services are available will require a comprehensive response from many stakeholders. At the service delivery level MAs should ensure treatment is available on a continuous and sustainable basis; and link to comprehensive prevention services, including addressing the specific prevention needs of PLHIV. Also, Member Associations should, whenever possible, both advocate for and make a range of comprehensive HIV treatment and care services available free of charge so they are accessible to all regardless of income, gender or identity. Where direct provision of antiretroviral treatment is not possible, appropriate referral and follow-up mechanisms should be established to enable a comprehensive delivery of treatment, care and support.

33. *Palliative care:* Palliative care should be comprehensive and improve the quality of life of clients, their families and their support networks. Comprehensive palliative care services include the prevention and relief of suffering by means of early

identification and assessment and treatment of pain and other physical, psychosocial and spiritual needs. It also includes the active referral and support of acute treatment and management of infection. Comprehensive palliative care includes the provision of asymptomatic management of infection, care to relieve pain and suffering, psychosocial care and support, spiritual care, planning for and provision of end-of-life care. This care can be delivered either at the service delivery point or through routine home-based care visits. Where direct provision of services is not possible, appropriate referral and follow-up mechanisms should be established to enable a comprehensive delivery of care.

HIV in the workplace

34. Implementing a bespoke HIV workplace programme needs to include the following five elements:
    i. developing a workplace policy;
    ii. training and capacity building for all staff and volunteers;
    iii. employee and family education;
    iv. community service, and
    v. human resource principles that support people living with HIV.
35. IPPF practice regarding opportunities for employment, training, or the promotion of an employee should not be conditional on the HIV status of a person.
36. Member Associations should undertake universal precaution measures and also offer all their healthcare providers post exposure prophylaxis following needle stick or other penetrative workplace injury.
37. Disclosure of HIV status in the workplace should be a matter of individual choice and should be voluntary at all times.
38. IPPF has a Federation-wide structure to support volunteers and staff living with HIV. IPPF+ fosters a culture of respect within IPPF that welcomes, supports and meaningfully involves staff and volunteers who are living with HIV in the workplace. IPPF+ has the following objectives:
    i. To contribute to the strengthening and development of comprehensive HIV workplace policies and programmes throughout the Federation.
    ii. To present the unified and organised voice of people living with HIV within IPPF to challenge stigma and promote their active participation in decision making
    iii. To advocate for a stigma free workplace environment within IPPF and ensure collaboration with similar initiatives at local, regional and international levels

As adopted by Central Council, November 1994
Last amended by Governing Council, May 2010

Policy 4.15.4

REPRODUCTIVE HEALTH

4.15.4 Female Genital Mutilation

1. IPPF opposes the practice of female genital mutilation and joins heads of state, other leaders, government, and inter-governmental and non-governmental organizations in advocating that it be eradicated. Member Associations should join efforts with governmental and other non-governmental organisations which are already working on this issue. They should also work with local women's networks. Member Associations in collaboration with others, have an important role in advocacy, information, education and research.

   For further information and guidance please refer to the statement of IPPF's International Medical Advisory Panel (IMAP) on 'Female genital mutilation'.

As adopted by Central Council, November 1995

Policy 4.16

4.16 ABORTION

Introduction

1. IPPF recognizes the huge public health burden posed by unsafe abortion and is committed to the reduction of this entirely preventable cause of maternal morbidity and mortality.

2. Beyond the public health concerns that necessitate availability of safe abortion services, IPPF believes that women and couples have the right to decide the number and spacing of their children, including the right to access contraceptive services and, when an unwanted pregnancy has occurred, safe abortion services. IPPF believes that all decisions regarding pregnancy must be voluntary and not coerced: no woman should be forced to carry a pregnancy to term or to undergo an abortion.

3. While taking steps to prevent unwanted pregnancy through modern contraceptive services, promotion of comprehensive sexuality education and work to eliminate sexual violence and coercion, IPPF understands that there will always be a need for safe abortion services.

4. IPPF recognizes the unique role it must play in the provision of safe abortion services and abortion-related advocacy given:
   - The Federation's broad geographic reach;
   - The Federation's global voice in advocacy;
   - The Federation's commitment to human rights, including sexual and reproductive rights (as enumerated in the IPPF Charter of Sexual and Reproductive Rights (1995) and Sexual Rights: an IPPF Declaration (2008) and in particular the right to the highest attainable standard of health;
   - The Federation's commitment to serving the poor, marginalized, socially-excluded, under-served and stigmatized communities who are unable to access care elsewhere;
   - The Federation's commitment to serving youth through youth-friendly services;
   - The ability of the Federation to deliver abortion services integrated within a package of comprehensive sexual and reproductive health services and using a rights-based approach; and
   - The respect and trust of individual Member Associations by their communities.

5. For these reasons, the Federation recognizes the need to clearly articulate its position and strengthen its work in abortion as a critical issue.

Advocacy

6. IPPF understands that legal restrictions on abortion services do not decrease abortion rates; rather, they only increase the proportion of abortions done in unsafe conditions. In addition, national legal restrictions on abortion services are often in conflict with international and regional human rights instruments and agreements

including the International Covenant on Civil and Political Rights; the International Covenant on Economic, Social and Cultural Rights; the Convention on the Elimination of all Forms of Discrimination Against Women; the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment; the Programme of Action from the International Conference on Population and Development; the Platform for Action from the Fourth World Conference on Women and the Maputo Plan of Action. IPPF therefore undertakes to:

i. Promote and defend laws and policies regarding abortion which are in line with recognized international human rights agreements and the latest reputable scientific evidence in order to reduce barriers to safe abortion services
ii. Work with partners to gather evidence and raise awareness about the effects of restrictive abortion laws on women, adolescents and their families
iii. Advocate for the expansion of legal indications for safe abortion within national laws on the basis of human rights and public health principles

Service Delivery

7. IPPF recognizes that, where MAs have clinical facilities providing sexual and reproductive health services, they have a duty to ensure that women can access abortion-related care, regardless of age, geographic location, religious beliefs, socio-economic, marital and HIV status.

8. Post-abortion care[1], including treatment for incomplete abortion, counselling and provision of post-abortion contraception, is a service that must be offered in every MA providing clinical sexual and reproductive health services, regardless of any national legal restrictions on abortion as these restrictions do not affect provision of post-abortion care.

9. Where MAs do not have clinical facilities, they should provide appropriate pre-abortion counselling and referrals with follow-up and post-abortion contraception counselling and/or services.

10. In addition, in nearly all countries, safe abortion is legally permitted for at least one indication. Therefore, IPPF undertakes to:

i. Provide modern contraception to prevent unwanted pregnancy, to ensure access to compassionate and non-judgemental safe abortion services and to ensure access to timely post-abortion care.
ii. Analyse the legal status of abortion within the countries in which it works and promote the most liberal interpretation of abortion laws (e.g. in line with WHO definition of health[2]) in order to maximize access to safe abortion services within existing abortion laws.
iii. Ensure that that no MA refuses support to any woman seeking a safe abortion.

[1] The post-abortion care model includes five elements which are critical for quality of care. These elements are: treatment of incomplete abortion and abortion-related complications; counselling to identify and respond to women's emotional and physical health needs; provision of post-abortion contraception services; provision of or linkages to reproductive and other health services; and creation of community and service-provider partnerships to ensure that services are responsive to the needs of the community.

[2] 'a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity' from Preamble to the Constitution of the World Health Organization as adopted by the International Health Conference, New York, 19-22 June, 1946; signed on 22 July 1946 by the representatives of 61 States (Official Records of the World Health Organization, no. 2, p. 100) and entered into force on 7 April 1948.

iv. Ensure the women it serves are able to benefit from scientific progress by promoting the latest technological advances and ensuring access to the safest and most appropriate abortion methods.

Combating Stigma

11. IPPF understands that the stigma around abortion keeps the issue hidden and poses a significant barrier to women and girls being able to exercise their rights to safe abortion and post-abortion care. IPPF therefore undertakes to:
    i. Raise the profile of the abortion debate, bringing the issue out of the shadows with an aim to normalize discussion around this sensitive issue, both within and outside of the Federation. This should be done within a context of comprehensive sexual and reproductive rights, acknowledging that when women lack the ability to make decisions for themselves and their families, their access to information and uninterrupted contraceptive services, safe abortion services and post-abortion care is compromised.
    ii. Work actively to combat the stigma surrounding abortion arising from all sources: the community, healthcare providers, staff and volunteers within the Federation, public officials, religious leaders, media and law makers.

POLICY IMPLEMENTATION

In line with this policy, the IPPF Secretariat and MAs should take all opportunities to raise awareness among volunteers and staff and to develop their own appropriate strategies with the understanding that work in abortion is a critical part of the Federation's mission.

12. Specific actions MAs should undertake to implement this policy include:
    i. Analyse the legal status of abortion in their country, identifying legal, policy and other restrictions on women's right of access to safe abortion services and strategically campaign for the removal of such restrictions and for the protection of existing liberal laws using appropriate evidence-based public health and human rights arguments.
    ii. Provide post-abortion care, which includes treatment for incomplete abortion, counselling and post-abortion contraception, as a minimum, essential abortion-related service in all clinical facilities.
    iii. Work to maximize the availability of and access to safe abortion services under existing laws in all MAs' clinical facilities.
    iv. Increase choice for women for post-abortion contraception including provision of a wide range of modern methods at the point of abortion service delivery.
    v. Provide responsible referrals and follow-up services through established referral networks for services which cannot be provided by an individual service delivery point.
    vi. Ensure that existing and new staff and volunteers are aware of IPPF policy and strategies related to abortion and are committed to its implementation, including provision of values clarification training on the topic of abortion to all staff and volunteers. The mission and values of the Federation should be clear during all recruitment processes to ensure new staff and volunteers share this common commitment.

vii. Educate the community about the consequences of unsafe abortion, the importance of increasing the availability of safe abortion services and of seeking services from safe abortion providers, including promotion of services provided by the MA.

viii. Work to ensure adequate numbers of providers (including physician and non-physician providers where possible) are trained in and able to provide comprehensive abortion care, through advocacy efforts with governments, universities or professional organizations and provision of training to MA and non-MA providers.

13. The London Office and Regional Offices should:

i. Support the development of abortion programmes and services in line with IPPF's Abortion Policy and abortion strategies and provide MAs with technical support or facilitate high quality technical assistance. The Central and Regional Offices will also endeavour to raise funds for the implementation and scaling-up of IPPF's work on abortion.

ii. Ensure that all relevant IPPF standards, guidelines and IEC materials reflect the above policy.

iii. Ensure that existing and new staff and volunteers are aware of IPPF policy and strategies related to abortion and are committed to implementation, including provision of values clarification training on the topic of abortion to all staff and volunteers.

iv. Develop strategies to strengthen and integrate abortion work within the Federation's core business, including strengthening the evaluation of abortion programmes through the Accreditation process.

v. Build the capacity of MAs to gather and use existing evidence to advocate for increasing access to safe abortion

vi. Establish and/or develop existing links with organisations working on the issue and facilitate links as needed between other organisations and MAs to further and strengthen their work on abortion.

vii. Work at the Regional and Global levels to raise awareness, combat stigma surrounding abortion and increase acceptance for access to safe abortion as a human right.

viii. Support learning and sharing of good practices and strategies for work in abortion services and advocacy between and within regions.

As adopted by Central Council, November 1995
As amended by Governing Council, November 2010

Policy 4.17

4.17 SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS AND THE CLIMATE CRISIS

Introduction

1. IPPF affirms that the climate crisis[1] is one of the greatest challenges of this time and that its impacts undermine the achievement of sustainable development[2] and the enjoyment of human rights[3];
2. IPPF recognizes that the climate crisis is underpinned by grave injustice and that those that contributed least to the climate crisis are most severely affected by its impacts while also having most limited access to resources to adapt;[4]
3. IPPF notes that some countries and regions are more severely impacted by the climate crisis than others, and that inequalities in socio-economic status and marginalization resulting from discrimination on grounds of gender, class, race, ethnicity, age, disability, and other characteristics heighten vulnerability to climate change;[5]
4. IPPF underlines that due to deeply ingrained, systemic discrimination, women and girls are at a higher risk of experiencing harmful effects of the climate crisis and that where women and girls are exposed to multiple and intersecting forms of discrimination, such as on account of their ethnicity, disability or migrant status, their vulnerability is heightened even more;[6]
5. IPPF acknowledges that the impacts of climate change, which include a rise in temperatures and sea levels as well as increased frequency and intensity of extreme weather events, are expected to increase over the remainder of this century,[7] which will further heighten the likelihood of humanitarian crises and displacement.

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[1] This policy uses the terms climate crisis and climate change interchangeably. IPPF prefers use of the term climate crisis to reflect the seriousness of the issue. The term climate change is used when referring to specific literature and materials on the issue employing this term and to refer to concepts such as climate change mitigation and adaptation. See Zeldin-O'Neill, S (2019) 'It's a crisis, not a change': the six Guardian language changes on climate matters. The Guardian. Available at: https://www.theguardian.com/environment/2019/oct/16/guardian-language-changes-climate-environment.

[2] See United Nations General Assembly (2015) Transforming our world: the 2030 Agenda for Sustainable Development. A/RES/70/1. Available at: https://www.un.org/ga/search/view_doc.asp?symbol=A/RES/70/1&Lang=E.

[3] See United Nations Human Rights Special Procedures (2019) Safe Climate - A Report of the Special Rapporteur on Human Rights and the Environment. A/74/161. Available at: https://wedocs.unep.org/bitstream/handle/20.500.11822/30158/Safe_Climate_Report.pdf?sequence=1&isAllowed=y.

[4] See Oxfam (2020) Confronting carbon inequality – Putting climate justice at the heart of the COVID-19 recovery. Available at: https://oxfamilibrary.openrepository.com/bitstream/handle/10546/621052/mb-confronting-carbon-inequality-210920-en.pdf?sequence=1&isAllowed=y.

[5] See IPCC, 2014: Climate Change 2014: Synthesis Report. Contribution of Working Groups I, II and III to the Fifth Assessment Report of the Intergovernmental Panel on Climate Change [Core Writing Team, R.K. Pachauri and L.A. Meyer (eds.)]. IPCC, Geneva, Switzerland, 151 pp. Available at: https://www.ipcc.ch/site/assets/uploads/2018/02/SYR_AR5_FINAL_full.pdf.

[6] See United Nations Human Rights Council (2019) Analytical study on gender-responsive climate action for the full and effective enjoyment of the rights of women - Report of the Office of the United Nations High Commissioner for Human Rights. A/HRC/41/26. Available at: https://undocs.org/A/HRC/41/26.

[7] Ibid.

Intersections between sexual and reproductive health and rights and the climate crisis

6. IPPF stresses that the climate crisis threatens the realization of sexual and reproductive health and rights and that adverse effects may include:
    a. Disruption of access to sexual and reproductive health services, such as in the aftermath of extreme weather events[8] or as a result of slow onset effects of the climate crisis, including increased water scarcity[9];
    b. Further harmful impacts on maternal and other sexual and reproductive health outcomes, such as due to increased heat exposure[10] or saline contamination of drinking water from rising sea levels[11];
    c. Increased incidence of sexual and gender-based violence and child, early and forced marriages during humanitarian crises and displacement[12] that are driven by the climate crisis;
    d. Heightened risks for the rights and health of people with diverse sexual orientations, gender identities and expressions, and sex characteristics, who are often more severely affected by disasters due to their frequent marginalization.[13]
7. IPPF notes that addressing gender inequality and other forms of marginalization is critical to reducing vulnerability to climate change and an important element of climate change adaptation;[14]
8. IPPF stresses that sexual and reproductive health and rights are essential for achieving gender equality,[15] health, and well-being and for overcoming marginalization and thus for strengthening individuals' and communities' resilience and capacity to adapt to the climate crisis;
9. IPPF highlights that sexual and reproductive health and rights should be an important consideration in measures aimed at enhancing resilience to both the slow onset impacts of the climate crisis and its more immediate effects;
10. IPPF remains firmly committed to human rights, including the reproductive rights framework adopted at the International Conference on Population and Development in

[8] Ibid.
[9] See International Women's Health Coalition, Marie Stopes International, IPPF et al (2019). A shared agenda - Exploring links between water, sanitation, hygiene, and sexual and reproductive health and rights in sustainable development. Available at: https://www.ippf.org/sites/default/files/2019-09/A%20Shared%20Agenda.pdf.
[10] See Bekkar, B, Pacheco, S, Basu, R et al (2020) Association of Air Pollution and Heat Exposure With Preterm Birth, Low Birth Weight, and Stillbirth in the US – A Systematic Review. JAMA Netw Open. 2020 Jun; 3(6): e208243. Available at: https://dx.doi.org/10.1001%2Fjamanetworkopen.2020.8243.
[11] See Khan, AE, Ireson, A, Kovats, S et al (2011) Drinking Water Salinity and Maternal Health in Coastal Bangladesh: Implications of Climate Change. Environ Health Perspect 119:1328–1332 (2011). Available at: https://doi.org/10.1289/ehp.1002804.
[12] See UNFPA (2015) The State of World Population 2015: Shelter from the storm - A transformative agenda for women and girls in a crisis-prone world. Available at: https://www.unfpa.org/sites/default/files/pub-pdf/State_of_World_Population_2015_EN.pdf.
[13] See J. C. Gaillard, Andrew Gorman-Murray & Maureen Fordham (2017) Sexual and gender minorities in disaster, Gender, Place & Culture, 24:1, 18-26, DOI: 10.1080/0966369X.2016.1263438. Available at: https://doi.org/10.1080/0966369X.2016.1263438.
[14] See IPCC, 2014: Climate Change 2014: Synthesis Report.
[15] See IPPF (2015) Sexual and reproductive health and rights – the key to gender equality and women's empowerment. Available at: https://www.ippf.org/sites/default/files/2020_gender_equality_report_web.pdf.

1994[16] and the sexual rights declaration adopted by IPPF in 2008[17], and the achievement of gender equality;

11. IPPF believes that the promotion of contraception as a strategy for climate change mitigation through a reduction in greenhouse gas emissions from reduced fertility levels instrumentalizes women's and girls' bodies, places emphasis and responsibility for the tackling of the climate crisis on those least responsible for contributing to it but most severely affected by its impacts, and is a deeply unjust and harmful distraction from countries' responsibilities to address the structural drivers of the climate crisis;
12. IPPF emphasizes that mitigation of climate change requires addressing unsustainable patterns of consumption and production, particularly in high-income countries, where per capita levels of greenhouse gas emissions far exceed those in lower income groups.[18]

IPPF priorities for advocacy and engagement (Implementation)

Internal capacity-building

13. IPPF will strengthen its own capacities to work on the climate crisis, including through learning from others engaged in the climate space.

A strengthened evidence base on interlinkages between sexual and reproductive health and rights and the climate crisis

14. IPPF will contribute to strengthening the evidence base on the links between sexual and reproductive health and rights and the climate crisis through documenting learnings from its own work with communities impacted by the climate crisis, including in humanitarian response.
15. IPPF will further advocate for and contribute to a strengthened research agenda on the links between sexual and reproductive health and rights and the climate crisis by external stakeholders, including through seeking partnerships with research organizations and through calling on donor governments and agencies to increase their funding support to civil society, multilateral agencies, and academic institutions to examine and document interlinkages between sexual and reproductive health and rights and the climate crisis.

Sexual and reproductive health and rights as critical to climate change adaptation and resilience

[16] See UNFPA (2014) Programme of Action of the International Conference on Population and Development – 20th Anniversary Edition. Available at: https://www.unfpa.org/sites/default/files/pub-pdf/programme_of_action_Web%20ENGLISH.pdf.
[17] See IPPF (2008) Sexual rights: an IPPF declaration. Available at: https://www.ippf.org/sites/default/files/sexualrightsippfdeclaration_1.pdf.
[18] Per capita CO_2 emissions in high-income countries amounted to 10.4 metric tons per capita in 2016 compared to 0.3 metric tons per capita in low-income countries. In middle-income countries, per capita CO_2 emissions were 3.7 metric tons per capita. See World Bank data on CO_2 emissions (metric tons per capita). Available at: https://data.worldbank.org/indicator/EN.ATM.CO2E.PC.

16. IPPF will support individuals and communities to adapt to the impacts of the climate crisis through its service delivery in settings affected by the climate crisis, including through humanitarian action.

17. IPPF will further advocate for sexual and reproductive health and rights to be recognized and supported as critical to climate change adaptation and resilience by governments and other external stakeholders and make the case for sexual and reproductive health and rights to be integrated into policy and implementation processes on climate change adaptation from global to local levels.

18. IPPF will advocate for recognition and support of a broad sexual and reproductive health and rights agenda in these contexts rather than a narrower focus on some aspects of it, such as contraception, only.

A focus on human rights and gender equality

19. IPPF will place human rights and gender equality at the centre of its efforts to address the climate crisis and will call on governments and other external stakeholders to do the same.

Partnerships and space for civil society

20. IPPF will advocate for the inclusiveness of climate policy processes, calling in particular for the meaningful engagement and participation of women's and youth groups as well as of groups working with and representative of marginalized populations.

21. IPPF will seek to build partnerships with organizations and stakeholders in the climate and environmental space that support a human rights-based approach to climate action.

Mitigation of climate change and environmental impacts

22. IPPF will work to address and reduce its own carbon footprint and environmental impacts through environmentally sustainable organizational policies and practices. IPPF will in particular:
    a. put in place an environmental management system for the IPPF Secretariat to be better able to manage the impact of its operations on the environment;
    b. set clear objectives for improving its environmental performance and for reducing its carbon footprint, and review its achievement against these regularly;
    c. publish information on its environmental performance at least annually;
    d. support IPPF Member Associations in the development and implementation of environmental risk mitigation strategies for their operations, with a view to strengthening processes and fostering a culture of sustainability across all levels of IPPF.

23. IPPF will, throughout its operations, adhere to up-to-date, evidence-based global, regional or national policies, guidelines, and protocols for the environmentally sound and sustainable management and disposal of health commodities and clinical and other waste.

24. IPPF will further emphasize the particular responsibility of high-emission countries to take decisive steps to lower their greenhouse gas emissions, and call on high-income countries to provide financial and other forms of support to low- and middle-income countries to respond and adapt to the climate crisis.

Approved by Governing Council in May 2011
As amended by Board of Trustees in November 2020.

Policy 4.18

4.18 MEETING THE SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS OF THE AGEING POPULATION

Introduction

1. Life expectancies are increasing and with this the overall population structure is changing. Globally it is estimated that people aged 60 years or over will reach 2 billion by year 2050[1] with the fastest rate of growth currently taking place in India, Brazil and China.[2] This change is particularly apparent in the ESEAOR and EN regions where the ageing population has been identified as a priority issue. It is estimated however that the rate of increase of the ageing population will be faster in developing countries than in developed countries by 2050[3].

2. This new IPPF policy is dedicated to the sexual health and rights of the ageing population across the Federation. It reflects the recognition of a growing need for action and a voice for their sexual health and rights. The policy will assist and guide Member Associations in finding an appropriate approach to address the Sexual Reproductive Health (SRH) needs of their ageing population. The policy will also recognise the positive aspects of sexuality in older age whilst identifying older groups needing particular support. These include women, people living in a care setting, the LGBTI community, people living with HIV, people facing violence and other under-served groups.[4]

3. There is currently limited data relating to the sexual activity of the ageing population however population surveys show that people remain sexually active well into advanced old age and that sexuality is important and takes many forms. Sexual activity is influenced by several physiological changes that occur as part of the ageing process as well as a number of psychosocial and socioenvironmental factors.[5]

4. This policy is in alignment with and in support of the WHO Global Report on Ageing and Health[6] and the UN Madrid International Plan of Action on Ageing.[7]

Definition

5. **Ageing Population:** For the purposes of this policy, the terms ageing population or older people will refer to people over the age of 60 unless otherwise stated.[8]

Guiding Principles

6. IPPF is committed to a human rights framework which prohibits any discrimination, exclusion or restriction on the basis of sex, age, gender, gender identity, sexual orientation, marital status, physical and mental disability or health status. In the context of this policy, this is particularly relevant to the issue of ageism.

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[1] 'Ageing in the Twenty-First Century: A Celebration and Challenge' UNFPA and HelpAge International Paper (2012)

[2] WHO Global Report on Ageing and Health (2015)
[3] 'Ageing in the Twenty-First Century: A Celebration and Challenge' UNFPA and HelpAge International Paper (2012)

[4] P4-5 IPPF Advocacy Paper on Ageing
[5] WHO Global Report on Ageing and Health (2015)
[6] WHO Global Report on Ageing and Health (2015)
[7] Madrid International Plan of Action on Ageing (2002)
[8] Starting age based on guidance from UN and WHO literature on Ageing including the WHO Global Report on Ageing and Health and the Madrid International Plan of Action on Ageing.

7. IPPF is committed to meeting and advancing the comprehensive Sexual and Reproductive Health needs of populations throughout all stages of their lives including into old age. This SRH commitment is based on the belief that sexual wellbeing is an important health factor that contributes to the quality of life and extends the healthy life expectancy of the ageing population.

8. IPPF believes in promoting the inclusion of SRH information and services for the ageing population using the Life Cycle Approach to encompass the changing needs of older people.

9. The sexual health needs and sexual rights of the ageing population should be recognized at local, national and international policy level as an integral element to the full achievement of sexual health and sexual rights.

Implementation

The IPPF Secretariat and Member Associations have a number of distinct roles to play in implementing this policy:

10. IPPF Secretariat and Member Associations will undertake actions that are inclusive of the ageing population, for instance in adapting or using language and policy that is age friendly, focuses on the positive aspects of sexuality amongst the ageing population and that includes older people when referring to vulnerable groups.

11. Where possible and appropriate, Member Associations should integrate services for the ageing population into pre-existing programmes using the Life Cycle Approach. This integration should take into consideration the varying needs of older people across the ageing spectrum and in particular the complex needs of vulnerable older people living in a residential care setting; living with HIV; the older LGBTI communities; older people from underserved ethnic groups and older migrants.

    IPPF Secretariat and Member Associations must carefully consider the sexual health needs and rights of older women as a key group when adapting or designing programmes, policies and services for the ageing population. Older women are at increased risk of being victims of sexual violence because of their socioeconomic dependency and, in some settings, because of gender-based inequities.[9] In addition to these vulnerabilities, there are physiological factors affecting a woman's sexuality and sexual health to consider, principally the menopause or other serious health problems. Furthermore, many women live in cultural settings where sexuality in older age is frowned upon and where traditional gender roles limit their ability to express their sexual needs.[10]

12. IPPF Secretariat and Member Associations will work together in partnership with other Member Associations, Civil society organizations and specialists with experience of service delivery with the ageing population. This will be in order to share learning, experience, models and programmes as well as gathering tools and resources, translating pre-existing tools and sharing best practices. Successes and useful materials will also be shared across a wider audience including healthcare providers, social workers and within family and residential care settings.

[9] World Health Organization. Gender based violence. Geneva: WHO; 2013
[10] Bulletin of the WHO: Sexual Health in Older Women – September 2013.

13. IPPF Secretariat and Member Associations will involve and empower older people, particularly women and those from different ethnic communities, to be represented at all levels in the design, implementation and evaluation of programmes, policies and services as a means of recognising the contribution that older people can make to the development of SRH within the Federation. This is in line with IPPF's core values of diversity and participation.

14. IPPF Secretariat and Member Associations will promote the inclusion of older people within the governance of Member Associations and other volunteering opportunities.

15. IPPF Secretariat and Member Associations will work together to produce and provide manuals and training for the development of programmes and services to meet the needs of the ageing population. These materials will support those professionals working with this group by improving their awareness and understanding of the sexual health needs and rights of the ageing population.

16. IPPF Secretariat and Member Associations will collaborate and partner with organizations working with and for the ageing population in order to promote their sexual rights, ensure they are treated with dignity and advocate for age appropriate responses to their sexual and reproductive health and rights' needs.[11]

17. IPPF Secretariat and Member Associations will advocate for the SRH needs and rights of the ageing population with governments and raise awareness for the need to adopt and implement age friendly policies and legislation within country context. The Federation's advocacy will highlight not only the SRHR challenges facing the ageing population[12] but also the positive aspects of ageing and associated societal benefits including the contribution that an empowered older population can make to society and the importance of promoting healthy and active ageing where sexuality and intimacy is respected.

18. IPPF Secretariat, together with IMAP, will develop guidance and statements in relation to services and issues specific to ageing populations.

19. IPPF Secretariat will use all available mechanisms in the Federation to periodically and consistently monitor implementation of the ageing population policy as part of the Global Indicator Survey and the Service Statistics.

20. IPPF Secretariat will introduce the data collection of services and programmes for the ageing population, specifically for the age range 60+, as a means of monitoring and

[11] For example HelpAge International and the International Federation on Ageing.

12 Examples of such challenges specifically relating to the sexual health and rights of an ageing population include: reproductive cancers (breast, cervical, prostate), prevalence of or vulnerability to HIV /other STI's amongst the older population due to a lack of knowledge or education on the risks and means of prevention, potentially higher risk for older people who are divorced/widowed and looking for new sexual partners later in life with limited knowledge or access to knowledge about STI/HIV as education is targeted to young people of reproductive age, sexual violence or coercion in a residential care setting, domestic violence, sexual dysfunction, barriers to expressing sexuality amongst the older population with disabilities and menopause related health concerns.

reviewing the success of interventions and to furthering our understanding of the sexual health needs and rights of this group. This data and IPPF experiences will be shared externally as appropriate in order to promote awareness and widespread learning and development around this subject.

Glossary

21. **Life Cycle Approach:** The Life Cycle and Life Cycle Approach refer in SRHR terms to providing services throughout the life cycle of a client or service user. A client centred package of integrated services through the lifecycle would span across early ages, young adolescents, young people, adulthood and older populations and also can be termed in relation to sexual activity. This includes before sexual maturity, when sexually mature and unmarried, sexually mature and married, and after the fertile period. (Adapted from IPPF IPES Life Cycle Approach introduction).

22. **Healthy Life Expectancy:** This term refers to an estimate of the number of healthy years an individual may live which are free from disability or disease.[13]

23. **Healthy Ageing:** The process of developing and maintaining the functional ability that enables wellbeing in older age.[14]

24. **Under-served:** are people who are not normally or adequately reached by sexual and reproductive health programs due to lack of political will and/or institutional capacity. This includes people who are wholly or partially excluded from full participation in the society in which they live because of stigma and discrimination.

Approved by Governing Council in November 2015

[13] P6 IPPF Advocacy Paper on Ageing
[14] WHO Global Report on Ageing and Health Glossary (2015)

Policy 4.19

4.19 FORCED LABOUR AND HUMAN TRAFFICKING

Introduction

1. In 2014, it was estimated that there are 21 million women, men and children in forced labour – either trafficked, held in bondage or working in slavery-like conditions - and that this was generating $150billion in illicit profits.[1] Trafficking is reported to involve nearly every part of the world as a place of origin/recruitment, transit or destination.[2]
2. Due to recent enhanced research methodology, in 2016 this figure is estimated to be closer to 46 million people enslaved in 167 countries. The types of enslavement include human trafficking, forced labour, debt bondage, forced or servile marriage or commercial sexual exploitation.[3]
3. Women and girls account for 70% of detected victims of global human trafficking and sexual exploitation accounts for 53% of detected forms of exploitation[4]. Within these statistics there are clear links and consequences for the Sexual and Reproductive Health and Rights (SRHR) of victims. Trafficking is often a 'gendered crime' with evidence currently suggesting that those trafficked into the sex industry and as domestic servants are more likely to be women and children.[5]
4. The limited research on the health impact of survivors reported high levels of physical and/or sexual abuse before (59%), during (95%) and after their exploitation with commonly reported health problems after the trafficking experience that include sexual and reproductive health problems.[6]
5. Forced Labour or Modern Slavery is a global problem and constitutes a 'high' or 'extreme risk' in 115 countries[7] representing almost 60% of countries being at high risk of using slave labour in their supply chains.
6. The United Kingdom is ranked as one of the top 10 countries taking the most action to combat modern slavery[8]; this has been characterized by strong political will, substantial resources, and a strong civil society that holds governments to account.
7. The Modern Slavery Act 2015, and the responsibility it places on companies has contributed to this positive ranking. The Act integrates human rights into the UK regulatory framework by ensuring that perpetrators of modern slavery crimes are suitably punished, providing defence for victims of slavery and trafficking and requiring businesses with income over a certain threshold to produce a statement setting out the steps they have taken to ensure there is no modern slavery in their

[1] ILO: The protocol of the Forced Labour Convention (2014)
[2] WHO : Understanding and addressing violence against women – Human Trafficking (2012)
[3] Global Slavery Index – Walk Free Foundation (2016)
[4] UNODC Global Report on Trafficking in Persons (2009)
[5] USDOS Trafficking in Persons Report (2011)
[6] WHO: Understanding and addressing violence against women – Human Trafficking (2012)
[7] Global ranking released by a Verisk Maplecroft research study (assessing incidents of human trafficking or slavery, national laws, and the quality of law enforcement across 198 countries) August 2016.
[8] Global Slavery Index – Walk Free Foundation (2016)

own business and their supply chains.[9] This statement requirement applies to IPPF; so outlining transparency in IPPF supply chains will have Federation wide implications.

8. It is this requirement alongside the increasingly prevalent issue of forced labour and human trafficking and their links to abuses of sexual and human rights that has prompted the development of this policy with the aim of further positive action across the Federation.

Guiding Principles

9. Forced labour and human trafficking are a global crime resulting in an abhorrent abuse of dignity and human rights which disproportionately affect women and children. This policy, however, is aimed towards all persons who may be adversely affected by forced labour and human trafficking including women, men, children, transgender, intersex, non-binary persons, persons with disabilities, those who use drugs, those trafficked for sex.
10. IPPF finds the practice of forced labour and human trafficking unacceptable and takes a position of zero tolerance towards trafficking in human beings for sexual and labour exploitation.
11. IPPF will take a number of proactive steps both at Secretariat and MA level with the aim of ensuring that this practice does not exist at any level of the organisation and that the best possible support, care and compassion is provided to the victims of this crime with whom IPPF comes into contact, in particular within the field of SRHR.
12. In developing this policy, IPPF is making a commitment to uphold Point 5 of the IPPF Declaration of Sexual Rights: Ensuring sexual rights for all includes a commitment to freedom and protection from harm.
13. A key aim of this policy is to mobilise IPPF Member Associations around the world to develop and implement their own policies, raise awareness and in particular advocate on behalf of victims of forced labour and human trafficking whose SRH Rights have been violated. This aligns with IPPF Strategic Framework Secretariat Implementation Plan Outcome 1, Priority 1 to galvanise commitment and secure legislative, policy and practice improvements.
14. This policy extends to all IPPF staff and volunteers. IPPF believes that all those working for IPPF should not engage in activities and/or be involved with entities that violate human rights.
15. This policy places an onus on the Federation's affiliates to demonstrate their commitment against forced labour by making efforts to ensure that their entire supply chain is free from forced labour and/or trafficking.
16. This policy reflects the need to make an active contribution to a global issue and give a voice to those persons and populations affected, in particular where victims' sexual health has been adversely affected and they lack access to adequate sexual and reproductive health care.
17. The sexual and reproductive health of the victims of forced labour and human trafficking for sexual exploitation, should be recognised at local, national and

[9] Section 54 of the Modern Slavery Act 2015, for UK government Modern Slavery definition see glossary.

international policy levels as an integral element to the full achievement of SRHR across the Federation.

18. This policy is distinct in its focus on forced labour and human trafficking and is separate from the subject of sex work and sex workers' rights.

Implementation

At the implementation stage of this policy, IPPF will conduct further consultation with MAs and their target groups to ensure the most appropriate approach to policy implementation.

19. IPPF secretariat will carry out due diligence checks with partners and suppliers to ensure that our entire supply chain is free of slavery and trafficking. These checks will be embedded into Secretariat-wide principles and procedures with regular monitoring of implementation.
20. IPPF Secretariat will complete an annual statement in compliance with UK Government requirements setting out the steps we have taken to ensure that our supply chain is free of slavery and trafficking.
21. IPPF will ensure all Secretariat staff fully understand and comply with this policy, and monitor compliance.
22. IPPF will provide support and guidance to MAs in order to establish country specific policies and procedures to address the issue of forced labour and ensure that MA supply chains are free of trafficking and slavery. E.g. Due diligence checklist, regular monitoring and compliance, staff policy briefing.
23. IPPF Secretariat will encourage greater knowledge sharing, networks and learning amongst MAs around the issue of forced labour and human trafficking, in particular aiming to offer sexual and reproductive health care and rights for individuals who have been affected by sex trafficking.
24. IPPF Secretariat will support governments in the development of legislation on the SRHR implications of this issue.
25. The Federation will work within its powers to provide support to victims of human trafficking and address any SRHR needs that may develop as a result of their experience.
26. As a means of becoming a more open and transparent Federation, IPPF will publish a list of suppliers, recruiters and contractors to map the IPPF supply chain and encourage MAs to do the same.
27. IPPF Secretariat will work closely with MAs to raise awareness around the issue of forced labour and human trafficking and in particular its impact on the SRHR of those affected.
28. As a minimum, IPPF expects that MAs make efforts to ensure that their supply chain is free of slavery and trafficking and that the SRHR needs of victims of these crimes are integrated into their work. IPPF will work with MAs to support them to achieve this aim.

Glossary

Human trafficking

29. The recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation.[10]

Human trafficking and sex work

30. Human trafficking into the sex sector is not the same as sex work. Where consent is absent for reasons including threat or use of force, deception, fraud, and abuse of power or involvement of a child, such activity would constitute a human rights abuse which must be treated as a criminal offence.[11]

Slavery

31. Slavery is the status or condition of a person over whom all or any of the powers attaching to the right of ownership are exercised. Given that legal 'ownership' of a person is not possible, the key element of slavery is the behaviour on the part of the offender as if he/she did own the person, which deprives the victim of their freedom.[12]

Forced Labour

32. Forced labour is defined as work that is performed involuntarily and under coercion. It can take place in any industry including in the informal economy. Many victims in particular women and girls are subjected to commercial, sexual exploitation, but forced labour is also prevalent in sectors such as agriculture, fishing, domestic work, construction, manufacturing and mining. [13]

Sex Work

33. Female, male and transgender adults who receive money or goods in exchange for sexual services, either regularly or occasionally, and who may or may not consciously define those activities as income generating.[14]

[10] United Nations Protocol to Prevent, Suppress, and Punish Trafficking in Persons – UN General Assembly 2000
[11] Amnesty International Policy on state obligations to respect, protect and fulfil the human rights of sex workers 2016

[12] UK Government Guidance issued under section 54(9) of the Modern Slavery Act 2015 – Annex A 'Modern slavery Definition'.
[13] ILO Forced Labour Convention No.29
[14] UNHCR HIV and Sex Work in Refugee Situations: A Practical Guide to Launching Interventions 2010

Appendix A – MA implementation guidance

As a means of supporting the implementation of this policy, MAs may wish to introduce or develop a number of initiatives which will contribute to the fight against modern slavery and human trafficking, in particular, for sexual exploitation. These initiatives may include:

a. Direct and/or indirect victim assistance including protection of and support for those who have been affected by human trafficking.
b. Taking a strong stand against modern slavery where this is relevant in the public debate or in the political environment.
c. Lobbying at a local, national and international level where forced labour and human trafficking standards are not being met.
d. Adoption of an openly anti-trafficking stance in outward facing work including with clients, partners, staff, volunteers, donors and other stakeholders.

Appendix B – Relationship between IPPF and USAID

- IPPF is currently both an awardee and sub-awardee of USAID HIV/AIDS funds and as a condition of accepting these funds, IPPF is bound by the following Opposition Statement: *"by accepting this award or any sub award, a nongovernmental organization or public international organization awardee/sub awardee agrees that it is opposed to the practices of prostitution and sex trafficking."*

- This does not preclude or prevent work with individuals to provide necessary health care (including palliative care, treatment of post-exposure pharmaceutical prophylaxis, and necessary pharmaceuticals and commodities, including test kits and condoms). However, it does require that through its policies and practices, IPPF as a recipient of USAID funding, must (1) accept the Opposition Statement (as above) (2) maintain sufficient separation from affiliated organisations in order to avoid confusing the US government's desired message on these topics and (3) ensure that activities, as well as those of their affiliates not deemed sufficiently independent, are consistent with the stated opposition.

- As such, while we may not use the same terminology as the US government or agree with all aspects of its position, we are obligated to comply with the associated requirements as long as they are legally valid and included in our funding agreements. Failure to do so may be considered noncompliance leading to de-funding or other sanctions.

- Until further notice, therefore, it is the responsibility of IPPF to ensure that the design and implementation of affected activities (whether or not US government funded), as well as formulation, adoption and issuance of stances, statements, policies, and advocacy efforts, are consistent with the Opposition Statement. All questions concerning the Statement and other legal and policy requirements applicable to US government aid should be referred to IPPF's London Office Project Director of USAID funding.

As adopted by Governing Council, November 2016

Policy 4.20

4.20 SEX WORK

The IPPF Sex Work Policy makes clear the position and commitments of the International Planned Parenthood Federation (IPPF) with regards to sex work. This is the first time IPPF has taken a position on sex work, and presents human rights-based values and principles which apply broadly to all contexts, without being prescriptive about approaches or actions. It aims to provide a framework to guide IPPF's programming, service delivery and advocacy, and is based on sex workers' lived experiences in all their diversity. It is rooted in positions taken by sex worker-led organizations and networks across the world, and in documents that IPPF has discussed and published in the last few years,[1] particularly *Sexual Rights: An IPPF declaration.*[2]

Member Associations (MAs) of IPPF are encouraged use the policy as guidance to be integrated into their commitment to respect, protect and advance the rights of sex workers throughout their activities, advocacy and policies, as relevant to their strategic goals and national contexts. While this policy allows MAs to decide which elements to draw from in their national context, MAs may not campaign, advocate or take action in opposition to the positions laid out below.

Definitions and Concepts

For the purposes of this policy paper, IPPF defines 'sex work' as *the provision of sexual services by and between consenting adults for some form of remuneration, with the terms agreed between the parties*.[3] IPPF believes it is important to explicitly refer to the aspect of consent between the parties to make clear the absence of coercion in these interactions.[4] Sex work takes different forms and can be more or less formal,[5] frequent or sporadic, take place in diverse contexts, including digital ones, involve people of different/varying genders, and differ between and within countries and communities.

1 Ania Shapiro, 'Discussion Paper: IPPF EN Member Associations' and Partners' Viewpoints on Sex Work and Experiences Engaging with Sex Worker Communities.' (2021) Report / Summary of IPPF Roundtable Discussion on Sex Work, 10 June 2019.

2 'Sexual Rights: An IPPF Declaration' (International Planned Parenthood Federation 2008) <https://www.ippf.org/resource/sexual-rights-ippf-declaration>.

3 This position paper uses the definition of sex work published by Amnesty International in their policy paper. See, 'Amnesty International Policy on State Obligations to Respect, Protect and Fulfil the Human Rights of Sex Workers' (Amnesty International 2016) <POL3040622016ENGLISH.pdf>.

4 Where consent is absent for reasons including threat or use of force, deception, fraud, and abuse of power or involvement of a child, such activity would constitute a human rights abuse. (See definition of 'Consent' for further discussion.)

5 See also the definition employed by the World Health Organization (WHO),'Prevention and Treatment of HIV and Other Sexually Transmitted Infections for Sex Workers in Low- and Middle-Income Countries: Recommendations for a Public Health Approach' (World Health Organization 2012) <https://www.who.int/publications/i/item/9789241504744>.

IPPF takes the lead from the perspectives of sex worker-led organizations in using the term 'sex worker.'[6] The terms 'prostitute' and 'prostitution' are often connected with stigmatization, criminalization and a lack of agency, so we will not use these words.[7]

Fundamental to our understanding of sex work and our position on it, is the respect for people's lived experiences and self-identification. IPPF recognizes that all people, including sex workers, lead complex, intersectional, multidimensional lives. This allows IPPF to transcend the victim/criminal dichotomy that exists in some feminist theorizing and engage with sex workers' full humanity.

Sex work as an activity between consenting adults is different from trafficking and associated human rights violations.[8] Sex worker-led organizations have consistently opposed the conflation of sex work with human trafficking, noting that such conflation is untrue and has negative effects on their lives and the respect of their human rights.[9] IPPF opposes all forms of forced labour and human trafficking. These abuses can occur in any labour sector, including sex work, and should be prevented as violations of the rights of workers without implying that sex work is inherently exploitative. We support sex workers' analysis about the negative impact of conflating sex work with rights violations such as human trafficking, forced labour, violence and abuse.

Sex workers face myriad barriers to their sexual and reproductive health and rights (SRHR). Widespread criminalization, stigma and discrimination not only violate their human rights to live free from violence and discrimination, the right to health, and sexual and reproductive rights, but also limit sex workers' capacity to self-organize, access funding for service provision and advocacy, and meaningfully engage with civil society organizations (including unions) and policymakers. Globally, sex workers experience high rates of HIV infection, sexually transmitted infections (STIs), unintended pregnancies, social marginalization and gender-based violence, yet are often excluded from mainstream sexual and reproductive health (SRH) programming.[10] Regrettably, some SRH programs advocate against sex workers' rights and/or disseminate stigmatizing messaging undermining sex workers' right to health.

Over the last decade, many international institutions, human rights organizations, researchers, and sex worker-led organizations and networks have jointly advocated for a rights-based approach to promoting sex workers' SRHR.[11] Specialized guidance and reports

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[6] The emergence of the term and its use are described on the timeline of the Global Network of Sex Work Projects. 'Carol Leigh Coins the Term "Sex Work" | Global Network of Sex Work Projects' (*Global Network of Sex Work Projects*, n.d.) <https://nswp.org/timeline/carol-leigh-coins-the-term-sex-work> accessed 12 May 2022.

[7] In some circumstances these types of terms have been reclaimed by communities. Usage is specific to those contexts and at the request of those communities. See, for example, Thaddeus Blanchette and Laura Murray, 'The Power of Putas: The Brazilian Prostitutes' Movement in Times of Political Reaction' [2016] openDemocracy <https://www.opendemocracy.net/en/beyond-trafficking-and-slavery/power-of-putas-brazilian-prostitutes-movement-in-time/>.

[8] See also the discussion on the conflation of trafficking and sex work in the section 'IPPF Positions' below.

[9] 'The Impact of Anti-Trafficking Legislation and Initiatives on Sex Workers' (Global Network of Sex Work Projects 2018) Policy Brief <https://www.nswp.org/sites/default/files/impact_of_anti-trafficking_laws_pb_nswp_-_2018.pdf>; 'Surveilled. Exploited. Deported. Rights Violations Against Migrant Sex Workers in Europe and Central Asia' (International Committee on the Rights of Sex Workers in Europe 2016) <https://d3n8a8pro7vhmx.cloudfront.net/eswa/pages/153/attachments/original/1631440923/icrse_briefing_paper_migrants_rights_november2016.pdf?1631440923>.

[10] 'Protecting the Rights of Sex Workers' (*UNAIDS*, 2 June 2017) <https://www.unaids.org/en/resources/presscentre/featurestories/2017/june/20170602_sexwork>.

[11] *Implementing Comprehensive HIV/STI Programmes with Sex Workers: Practical Approaches from Collaborative Interventions*, published by WHO, UNFPA, UNAIDS, NSWP, the World Bank, and UNDP in 2013, outlines comprehensive SRH care for sex workers and offers guidance for promoting community-based interventions in SRH and HIV care. Further, WHO's *Consolidated Guidelines on HIV Prevention,*

have been published which address intersectional forms of oppression experienced by sex workers, including on the basis of age,[12] sexual orientation and gender identity,[13] migration status,[14] HIV status,[15] and drug use.[16]

As a leading organization for SRHR for nearly 70 years, IPPF first published the 1997 *Charter Guidelines on Sexual and Reproductive Rights*,[17] the landmark 2008 *Sexual Rights: An IPPF declaration,*[18] and subsequently its 2018 *IPPF Policy Handbook*.[19]

Sexual Rights: An IPPF Declaration reaffirms sex workers' rights to be free from violence created by stigma and discrimination,[20] as well as their right to safe working conditions, health services, and the support necessary to insist on safer sex practices.[21] The *IPPF Policy Handbook* further identifies sex workers as a marginalized group and outlines measures to address their SRHR, including through gender analysis,[22] linkages between SRH and HIV

Diagnosis, Treatment, and Care for Key Populations stresses the vital role of civil society organisations in confronting discrimination and challenging punitive legal and social norms, in tandem with community-led organisations, public health leaders, and policymakers. 'Implementing Comprehensive HIV/STI Programmes with Sex Workers: Practical Approaches from Collaborative Interventions' (WHO; UNFPA; UNAIDS; NSWP; World Bank; UNDP 2013) <https://www.who.int/publications/i/item/9789241506182>; 'Consolidated Guidelines on HIV Prevention, Diagnosis, Treatment, and Care for Key Populations' (World Health Organization 2016) <https://www.who.int/publications/i/item/9789241511124>.

[12] 'HIV and Young People Who Sell Sex' (World Health Organization 2015) Technical Brief <https://apps.who.int/iris/bitstream/handle/10665/179868/WHO_HIV_2015.7_eng.pdf>; 'Young Sex Workers' (Global Network of Sex Work Projects 2016) Policy Brief <https://www.nswp.org/resource/nswp-policy-briefs/policy-brief-young-sex-workers>.

[13] 'The Homophobia and Transphobia Experienced by LGBT Sex Workers' (MPact Global Action for Gay Men's Health & Rights and Global Network of Sex Work Projects 2018) Briefing Paper <https://www.nswp.org/resource/nswp-briefing-papers/briefing-paper-the-homophobia-and-transphobia-experienced-lgbt-sex>; 'Underserved. Overpoliced. Invisibilised. LGBT Sex Workers Do Matter' (International Committee on the Rights of Sex Workers in Europe) <https://www.eswalliance.org/underserved_overpoliced_invisibilised_lgbti_sex_workers_do_matter>; 'Transgender Europe (TGEU) Sex Work Policy' (Transgender Europe 2016) <https://tgeu.org/sex-work-policy/>.

[14] 'Sex Work Migration Health' (TAMPEP International Foundation 2009) <https://tampep.eu/wp-content/uploads/2017/11/Sexworkmigrationhealth_final.pdf>; 'Working with Refugees Engaged in Sex Work: A Guidance Note for Humanitarians' (Women's Refugee Commission 2016) <https://reliefweb.int/report/world/working-refugees-engaged-sex-work-guidance-note-humanitarians>; 'Migrant Sex Workers' (Global Network of Sex Work Projects 2018) Briefing Paper <https://nswp.org/resource/nswp-briefing-papers/briefing-paper-migrant-sex-workers>.

[15] 'UNAIDS Guidance Note on HIV and Sex Work' (Joint United Nations Programme on HIV/AIDS 2012) <https://www.unaids.org/en/resources/documents/2012/20120402_UNAIDS-guidance-note-HIV-sex-work>; 'Services for Sex Workers' (Joint United Nations Programme on HIV/AIDS 2014) Guidance Note <https://www.unaids.org/sites/default/files/media_asset/SexWorkerGuidanceNote_en.pdf>; 'Advancing the Sexual and Reproductive Health and Human Rights of Sex Workers Living with HIV' (Global Network of People Living with HIV/AIDS and Global Network of Sex Work Projects 2010) A Policy Briefing <https://gnpplus.net/resource/advancing-the-sexual-and-reproductive-health-and-human-rights-of-sex-workers-living-with-hiv/>.

[16] 'Sex Workers Who Use Drugs: Ensuring a Joint Approach' (Global Network of Sex Work Projects and the International Network of People Who Use Drugs 2015) <https://inpud.net/sex-workers-who-use-drugs-ensuring-a-joint-approach/>; Melissa Ditmore, 'When Sex Work and Drug Use Overlap: Considerations for Advocacy and Practice' (Harm Reduction International 2013) <https://www.hri.global/files/2014/08/06/Sex_work_report_%C6%924_WEB.pdf>.

[17] 'IPPF Charter Guidelines on Sexual and Reproductive Rights' (International Planned Parenthood Federation 1997) <https://www.ippf.org/sites/default/files/ippf_charter_on_sexual_and_reproductive_rights_guidlines.pdf>.

[18] 'Sexual Rights: An IPPF Declaration' (n2).

[19] 'IPPF Policy Handbook' (International Planned Parenthood Federation 2018) <https://www.ippf.org/sites/default/files/2018-12/POLICY%20HANDBOOK%20ENGLISH.pdf>.

[20] 'Sexual Rights: An IPPF Declaration' (n2) art 3.

[21] ibid art 7.

[22] 'IPPF Policy Handbook' (n2) Policy 1.3 para 10h.

services,[23] acknowledgment of the double stigma faced by sex workers living with HIV,[24] measures to reduce gender-based violence, and the acceptance of sex workers' choice of employment.[25] The Policy Handbook also makes a clear distinction between sex work and forced labour and human trafficking.[26]

Guiding concepts

The IPPF position on sex work is grounded in human rights and universal access to health frameworks included in *Sexual Rights: An IPPF Declaration*, and key concepts such as intersectionality and reproductive justice.

Human Rights

Foundational to the IPPF mission and values is the Universal Declaration of Human Rights (UDHR), which declares that all human beings are born free and equal in dignity and rights, and that all people are entitled to the full respect, protection and fulfilment of their human rights, without distinction of any kind.[27] The IPPF human rights-based approach uses the framework of rights and norms emanating from the International Bill of Human Rights, composed of the UDHR, International Covenant on Civil and Political Rights (ICCPR),[28] and International Covenant on Economic, Cultural and Social Rights (ICECSR),[29] as well as other binding human rights treaties, *inter alia* the Convention on the Elimination of all forms of Discrimination against Women (CEDAW),[30] Convention on the Rights of the Child (CRC),[31] Convention against Torture (CAT),[32] Convention on the Rights of Persons with Disabilities (CRPD),[33] Convention on the Elimination of Racial Discrimination (CERD),[34] and the authoritative interpretations and norms developed by United Nations (UN) treaty monitoring bodies and Special Procedures.

Intersectionality

Intersectionality has its roots in activism, born out of concrete experiences of structural inequality and discrimination as verbalized by Black women in the 1970s and 1980s.[35] Intersectionality, or an intersectional approach, asks policymakers to consider how power is structured in society to produce inequalities and how these interact and compound in people's lives.[36] People do not live single-issue lives, where they experience, for example,

[23] ibid Policy 4.15.3 para 4.
[24] ibid Policy 4.15.3 para 20.
[25] ibid Policy 4.15.3 para 20b.
[26] ibid Policy 4.19 para 18.
[27] Universal Declaration of Human Rights (adopted 10 December 1948) UNGA Res 217 A(III) (UDHR) arts 1, 2.
[28] International Covenant on Civil and Political Rights (adopted 16 December 1966, entered into force 23 March 1976) 999 UNTS 171 (ICCPR).
[29] International Covenant on Economic, Social and Cultural Rights (adopted 16 December 1966, entered into force 3 January 1976) 993 UNTS 3 (ICESCR).
[30]Convention on the Elimination of all forms of Discrimination against Women (adopted 18 December 1979, entered into force 3 September 1981) 1249 UNTS 1 (CEDAW).
[31] Convention on the Rights of the Child (adopted 20 November 1989, entered into force, 2 September 1990) 1577 UNTS 3 (CRC).
[32] Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (adopted 10 December 1984, entered into force 26 June 1987) 1465 UNTS 85 (CAT).
[33] Convention on the Rights of Persons with Disabilities : resolution / adopted by the General Assembly, 24 January 2007, A/RES/61/106 (CRPD).
[34] International Convention on the Elimination of All Forms of Racial Discrimination (adopted 21 December 1965, entered into force 4 January 1969 660 UNTS 660 195 (CERD).
[35] Kimberle Crenshaw, 'Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics' (1989) 1989 University of Chicago Legal Forum <http://chicagounbound.uchicago.edu/uclf/vol1989/iss1/8>.
[36] Patricia Hill Collins and Sirma Bilge, *Intersectionality* (Second edition, Polity Press 2020) <https://books.google.se/books?id=fyrfDwAAQBAJ&lpg=PP1&dq=Intersectionality%20bilge&pg=PP1#v=onepage&q=Intersectionality%20bilge&f=false>; see also, Shreya Atrey, 'Comparison in Intersectional

sexism, racism, and ableism[37] separately, but instead experience barriers to their rights and discrimination which intersect and mutually reinforce each other.

Reproductive Justice
Similarly, reproductive justice is defined as the human right to maintain personal bodily autonomy, have children, not have children, and parent children in safe and sustainable communities.[38] The reproductive justice framework centers *access*, not choice, because there is no meaningful choice without access.[39] Achieving reproductive justice depends on access to specific, community-based resources including high-quality health care, housing and education, a living wage, a healthy environment, and a safety net when these resources fail.[40] This requires an analysis of the systems of power, intersecting oppressions, and centering the most marginalized.[41] Reproductive justice also centers the social determinants of health and access to rights, which also aligns with guidance from UN human rights bodies.[42]

Universal access to health
IPPF's people-centered programming and service delivery are based in the firm conviction that every human being must enjoy universal access to quality health care and wellbeing, free from stigma, discrimination and violence, and tailored to their particular needs. IPPF takes an evidence- and rights-based approach that supports and empowers all people, including sex workers in general and sex workers from gender and sexual minorities in particular, to take control over their lives and their bodies. Our programming and services uphold privacy, confidentiality and promote choice, dignity, equality and justice.

Rights-Based Principles

This policy reaffirms that the human rights of all people, including sex workers, must be respected, protected and fulfilled. All human rights are indivisible and interdependent, including the following ones that have bearing on the issue of sex work.

The Right to Bodily Autonomy & Integrity and Sexual & Reproductive Health & Rights
Sexual and reproductive rights and the rights to bodily autonomy and integrity are located in certain human rights which are already recognized in national laws and international human rights documents. They include the rights to seek, receive, and impart information related to reproduction and sexuality; decide if, when and with whom to be sexually active or not; to have consensual sexual relations free from violence, discrimination or coercion; to choose if, when, and with whom to marry or found a family; and to decide if, when and how to have children.

Discrimination' (2018) 38 Legal Studies 379 <https://www.cambridge.org/core/journals/legal-studies/article/comparison-in-intersectional-discrimination/27FDAA9DCEEF94365FD995DDDBC5628C> and Shreya Atrey, *Intersectional Discrimination* (Oxford University Press 2019) <https://books.google.se/books?hl=en&lr=&id=kZOwDwAAQBAJ&oi=fnd&pg=PP1&dq=%22intersectional+discrimination%22&ots=925jFazGqF&sig=79kKYjP0ZOa7koOdjU0zey34ko4&redir_esc=y#v=onepage&q&f=false>.

[37] Ableism is discrimination in favour of able-bodied people. See, Frank Kuwonu, 'The Biggest Challenge Is Ableism, Not My Disability' (Africa Renewal, 10 August 2021) <https://www.un.org/africarenewal/magazine/august-2021/%E2%80%98-biggest-challenge-ableism-not-my-disability%E2%80%99> accessed 24 August 2022.

[38] 'Reproductive Justice' (Sister Song) <https://www.sistersong.net/reproductive-justice> accessed 23 August 2022.

[39] ibid

[40] Loretta Ross and Rickie Solinger, Reproductive Justice: An Introduction (University of California Press 2017)9-10.

[41] ibid

[42] Committee on Economic, Social and Cultural Rights (CESCR) General comment 22 on the Right to sexual and reproductive health (article 12 of the International Covenant on Economic, Social and Cultural Rights) (2016) E/C.12/GC/22.

The ability to make autonomous decisions about these issues is at the very core of the human rights to liberty and security, the right to privacy, the right to be free from violence, torture, cruel, inhuman and degrading treatment, the right to health, and the rights to equality and non-discrimination.[43] These human rights, among others, such as the right to education and the right to the benefits of scientific progress, form the foundation for sexual and reproductive rights and bodily autonomy and integrity.

These rights are also foundational to *Sexual Rights: An IPPF Declaration*, as seen in Principle 3 on non-discrimination, Article 3 on the rights to life, liberty, security of the person and bodily integrity, and Article 5 on personal autonomy.[44] In line with these principles and rights, respecting adults' right to engage in consensual sexual relations with each other, including in exchange for remuneration, is essential to respecting, protecting and fulfilling their sexual rights and bodily autonomy.

Consent

Sexual Rights: An IPPF Declaration emphasizes that ensuring sexual rights for all requires a commitment to freedom and protection from harm, meaning that all sex work should be based on affirmative consent between adults: consent which is informed, freely given, on-going, clear, mutual and can be withdrawn at any time.[45] Consensual sexual activity between adults is an exercise of the human right to bodily autonomy, including when it takes place while providing sexual services.

Consent always takes place within a context of power dynamics. All choices and decisions, including those regarding choice of livelihood, are influenced by the social context and power dynamics in which one makes them, including the contexts of capitalism, patriarchy, gender inequality, and institutionalized forms of discrimination based on age, gender, race, ethnicity, economic status, migration status, health status, education, disability and more. Historically, sex work has been treated differently from other areas of life in which adults make decisions, because it has been stigmatized as a moral transgression as a result of patriarchal norms and purity culture,[46] or has been incorrectly framed as inherently violent. Based on the Definitions and Concepts above, people's autonomy and capacity to consent to sex work must be respected in the same way that people's capacity to consent to engage in any other form of work, working environment, or make any other decision about their lives, is respected.

We reiterate that under no circumstance would a power imbalance leading to coercion and exploitation be considered under this stance, as that constitutes sexual exploitation and abuse. For example, the UN Protection from Sexual Exploitation and Abuse guidance[47]

[43] UDHR (n27) arts 1, 2, 3, 5, 7, 12, 16, 25, among others; ICCPR (n28) arts 2, 3, 7, 9, 17, 23, among others; ICESCR (n29) arts 2, 3, 10, 12, among others; CEDAW (n30) arts 1, 2, 3, 4, 5, 12, 13, 16, among others; See also CESCR General Comment 22 (n42); 'Women's Autonomy, Equality and Reproductive Health in International Human Rights: Between Recognition, Backlash and Regressive Trends' (United Nations Human Rights Special Procedures, Special Rapporteurs, Independent Experts & Working Groups 2017) <https://www.ohchr.org/Documents/Issues/Women/WG/WomensAutonomyEqualityReproductiveHealth.pdf> and 'Sexual Rights: An IPPF Declaration' (n2) art 3.

[44] 'Sexual Rights: An IPPF Declaration' (n2).

[45] ibid

[46] Purity culture is a doctrine emerging from evangelical Christianity that demands adherence to sexual abstinence prior to heterosexual marriage. It places responsibility on women to maintain sexual purity and control the 'desires' of men for example, by dressing modestly and pledging to their fathers to abstain from sex until marriage. This doctrine is rooted in sexual shame and eschews comprehensive sex education. Madison Natarajan and others, 'Decolonizing Purity Culture: Gendered Racism and White Idealization in Evangelical Christianity' (2022) 46 Psychology of Women Quarterly <https://journals.sagepub.com/doi/full/10.1177/03616843221091116>.

[47] 'Protection from Sexual Exploitation and Abuse (PSEA)' (UNHCR 2022) Emergency Handbook <https://emergency.unhcr.org/entry/32428/protection-from-sexual-exploitation-and-abuse-psea>.

advises that humanitarian aid workers must not exchange money or any goods or services for sex with 'persons of concern'[48] regardless of the legal status of sex work in the country in which they are working. This restriction is because of the great power imbalance between aid workers and the communities they serve, the subsequent increased potential for humanitarian workers to use the purchase or exchange of sex to exploit individuals and communities, and the need to abide by humanitarian principles and ensure that everyone receives goods and services based exclusively on their needs. It is, however, important to note that sex worker-led organizations highlight the significant contribution that foreign aid workers make to the local economy.

This restriction on humanitarian workers does not restrict sex workers from involvement in humanitarian response work, or from accessing goods and services. All IPPF's work in humanitarian contexts will ensure that sex workers are able to access all services without stigma. IPPF is guided by the Women, Peace and Security agenda, based in UN Security Council Resolution 1325[49] and subsequent statements, as well as the recognition that women, sexual minorities and people of non-binary gender identities are uniquely affected by these issues and should be centered in situations of war, conflict and humanitarian crises as essential stakeholders and contributors in peace processes.[50] As members of these affected groups, sex workers should also be included as stakeholders and contributors to these processes.

The Right to Work

The recognition of sex work as work is paramount to sex workers' ability to exercise their human rights. IPPF advocates for a diversity of livelihood opportunities and for governments to respect, protect and fulfil the human right to work through access to quality education, training opportunities, and social services. In line with this, IPPF validates the lived experiences of people who decide to engage in sex work. Simultaneously, we support the right to decent work and decent working conditions as described by International Labour Organisation standards and conventions.

The UDHR proclaims that all people have the right to work, to free choice of employment, to just and favourable conditions of work and to protection against unemployment.[51] Article 6(1) of the ICESCR also recognizes the right to work, which includes the right of everyone to the opportunity to gain their living by work which is freely chosen or accepted, and the obligation of states to take appropriate steps to safeguard this right.[52] Article 23 of the UDHR includes the right of workers to create a union, which is an objective of some sex worker-led organizations and networks. Sex worker-led organizations and rights coalitions in and of themselves are protected by the right to assemble and freely associate stated in Article 21 and 25 of the ICCPR.[53] More recently, the International Labour Organization's (ILO) four pillars of decent work (employment creation, social protection, rights at work, and social dialogue) [54] were included in the Sustainable Development Goal (SDG) 8 of the 2030 Agenda for Sustainable Development, to which all 193 Member States of the United Nations committed.[55]

[48] People identified as refugees, returnees, stateless, internally displaced, and asylum-seekers by the United Nations High Commissioner for Refugees (UNHRC). 'Populations of Concern to UNHCR' (2020) UNHCR Global Report <https://reporting.unhcr.org/sites/default/files/gr2020/pdf/Chapter_PoC.pdf>.
[49] Security Council Resolution 1325 (2000) [on women and peace and security] 2000 [S/RES/1325 (2000)].
[50] 'The Women Peace and Security Agenda: A Global Handbook' (UNDP 2019) <https://www.undp.org/content/dam/undp/library/peace/conflict-prevention-peacebuilding/Parliament_as_partners_supporting_the_Women_Peace_and_Security_Agenda_-_A_Global_Handbook.pdf>.
[51] UDHR (n27) art 23.
[52] ICESCR (n29) art 6(1).
[53] ICCPR (n28) art 21, 25.
[54] 'Decent Work' (International Labour Organization, 2015) <https://www.ilo.org/global/topics/decent-work/lang--en/index.htm> accessed 23 August 2022.
[55] 'Goal 8 | Department of Economic and Social Affairs' (United Nations Department of Economic and Social Affairs, Sustainable Development) <https://sdgs.un.org/goals/goal8> accessed 23 August 2022.

In line with the lived experiences of sex workers, we recognize that intersecting forms of oppression impact the ability of people to exercise the right to work. The right to free choice of work and employment, outlined in human rights treaties, SDGs and the ILO decent work agenda, include choosing to engage in sex work for material compensation. Those who do so are entitled to the same labour protections as all workers: a safe and healthy working environment, free from violence, discrimination or coercion; just and favourable remuneration, including social welfare benefits and social protection schemes; and the right to self-organization and collective action.[56] As will be discussed in later sections, sometimes sex workers are compelled to undergo repeated medical exams and tests based on the discriminatory assumption that they are 'vectors of disease' in order to be allowed to work, to which IPPF is opposed. In no case should any worker be subjected to medical procedures or tests without their free and informed consent.[57]

The Right to Live Free from Violence and Discrimination

Sexual Rights: an IPPF Declaration upholds the right to be protected from, and to have recourse regarding, all forms of violence and harm.[58] Principle 6 also declares that sexual rights may be subject only to those limitations determined by law for the purpose of securing due recognition and respect for the rights and freedoms of others, and that such limitations must be non-discriminatory, necessary and proportionate to the achievement of a legitimate aim.[59] In line with Principle 6, legal and policy measures which restrict or punish consensual sex between adults do not fall within this exception and are discriminatory, unnecessary and disproportionate, as they do not have a legitimate aim.

States have the obligation to protect sex workers from violence and discrimination, including that experienced in accessing health care and services. Under Article 2 of the ICESCR, all individuals and groups should be able to enjoy equal access to the same range, quality and standard of sexual and reproductive health facilities, information, goods and services and to exercise their rights to sexual and reproductive health without any discrimination.[60] Article 26 of the ICCPR states that "all persons are equal before the law and are entitled without any discrimination to the equal protection of the law."[61] Governments and state institutions are obliged to protect people, including sex workers, from violence and discrimination and provide them with access to justice and redress to address violations when they occur. Addressing stigma and discrimination requires not only legal and formal equality, but also substantive equality. Substantive equality requires that the distinct sexual and reproductive health needs of particular groups, as well as any barriers that particular groups may face, are addressed, with the needs of particular groups, such as sex workers, given tailored attention.[62]

Overwhelmingly, the most extensive human rights violations and abuses that sex worker-led organisations and IPPF MAs report are institutional violence, especially by law enforcement officers,[63] and discrimination against sex workers. Sex workers face

[56] *See* Ania Shapiro (n1).
[57] For example, the European Union's General Data Protection Regulation strictly controls and limits the collection of medical information. The protection of natural persons with regard to the processing of personal data and on the free movement of such data (General Data Protection Regulation) 2018 [Regulation (EU) 2016/679].
[58] 'Sexual Rights: An IPPF Declaration' (n2) principle 5.
[59] ibid principle 6.
[60] CESCR GC 22 (n42) para 22.
[61] ICCPR (n28).
[62] ibid para 24.
[63] 'Sex Work and Institutional Violence– Research in 13 Countries in Latin America.' (Redtrasex 2017) Regional Report <https://issuu.com/redtrasex/docs/informe_regional_violencia_instituc_104481e5766548/41>; 'Every Sex Worker Has a Story to Tell about Violence' (ASWA Alliance Africa 2019) <https://aswaalliance.org/every-sex-worker-has-a-story-to-tell-about-violence>; 'Arrest the Violence:

discrimination, *inter alia* when accessing housing, financial services (such as having a bank account) and in regards to child custody. Additionally, sex workers' families, in particular their children, are stigmatized, face discrimination, and institutional violence, such as the removal of children from their parents' custody solely on the basis of their being a sex worker.

Discrimination and institutional violence are more likely to impact specific groups of sex workers because of overlapping stigma and biased policy frameworks that enable these rights violations. For example, transgender sex workers, sex workers of colour, and migrants are most often targeted by law enforcement and are very likely to be harmed in these interactions.[64] Sex workers should be, though very rarely are, able to seek remedies when their rights are violated, whether those rights violators are state agents like the police or non-state actors such as abusers posing as clients.

The Right to Health

International human rights law enshrines the fact that all people have the right to enjoy the highest attainable standard of physical and mental health, including control over their sexuality and sexual and reproductive health, free from coercion, discrimination and violence.[65] Building on the right to health laid out in Article 15 of the UDHR and Article 12 of the ICESCR, *Sexual Rights: An IPPF Declaration* affirms that all persons have a right to the enjoyment of the highest attainable standard of physical and mental health, which includes the underlying determinants of health and access to sexual health care for prevention, diagnosis and treatment of all sexual concerns, problems and disorders.[66]

IPPF respects the right to health of all people, irrespective of their gender, sex, profession, race, ethnicity, migration status, ability or creed. This includes the rights of sex workers to available, accessible, acceptable and quality (AAAQ) health care and services, free from stigma, discrimination and violence. Health programming and legal frameworks that reinforce stigma and discrimination towards sex workers violate the right to health and the right to live free from violence and discrimination, as do policies that require forced testing of sex workers.

The right to privacy and confidentiality is an integral part of the right to health. Confidential health and personal information, including health status, migration status, and occupation, should not be shared without informed consent. This is of particular importance to sex workers and organizations working with them to provide services.

The Right to Family Life

Human Rights Violations against Sex Workers in Central and Eastern Europe and Central Asia' (SWAN 2009) <https://swannet.org/resources/arrest-the-violence-human-rights-violations-against-sex-workers-in-11-countries-in-central-and-eastern-europe-and-central-asia-2/>; Manjima Bhattacharjya, Emma Fulu and Laxmi Murthy, 'The Right(s) Evidence – Sex Work, Violence and HIV in Asia: A Multi-Country Qualitative Study' (United Nations Development Programme, UNDP, UNFPA, APNSW, Sangram 2015) <https://www.undp.org/asia-pacific/publications/rights-evidence-%E2%80%93-sex-work-violence-and-hiv-asia-multi-country-qualitative-study>; 'Human Rights Violations of Sex Workers, People in the Sex Trades, and People Profiled as Such: Submission to the United Nations Universal Periodic Review of the United States of America' (Best Practices Policy Project, Outlaw Project, Black Sex Workers Collective, New Jersey Red Umbrella Alliance, and Desiree Alliance 2019) <http://www.bestpracticespolicy.org/wp-content/uploads/2019/10/SWCoalition_UPR36_USA_2019.pdf>.

[64] For example, migrant sex workers from Zimbabwe are subjected to more severe violence from police and border guards in South Africa and Botswana. Jayne Arnott and Anna-Louise Crago, 'Rights Not Rescue: A Report on Female, Male, and Trans Sex Workers' Human Rights in Botswana, Namibia, and South Africa' (Open Society Initiative for Southern Africa and the Sexual Health and Rights Project 2009) <https://www.opensocietyfoundations.org/publications/rights-not-rescue>.

[65] UDHR (n27) art 25; ICESCR (n29) art 12; CESCR GC 14 and 22 (n42).

[66] 'Sexual Rights: An IPPF Declaration' (n2) art 7.

All people also have the right to the benefits of scientific progress, including in medicine and health services.[67] The UDHR, ICESCR, CEDAW and *Sexual Rights: An IPPF Declaration* also all establish rights around making choices about children and family that in turn depend on access to sexual and reproductive health and rights.[68] Sex workers have the right to decide if, when, and how to form a family, have children, and parent in safe and sustainable communities, and to AAAQ sexual and reproductive health services to support their choices. The families and children of sex workers have the right to live free from violence and discrimination, including that which is perpetuated by stigmatizing law and policy frameworks.

[67] ibid art 7.
[68] ibid art 9.

IPPF Positions on Sex Work

1. **IPPF condemns and works to end all forms of stigma, discrimination and violence against sex workers and lack of legal redress, and supports comprehensive efforts to dismantle systemic inequalities, including gender inequalities.**

Sex workers experience intersecting forms of stigma and discrimination that cause significant challenges in accessing quality sexual and reproductive health services and in being able to participate in civil society and enjoy their human rights.

Sex workers face formidable barriers to accessible, acceptable, appropriate and quality health services. Few health workers in SRH settings are aware of or informed about sex workers' needs, and sex workers have reported frequent violations of their right to privacy and confidentiality in health settings.[69] Due to the high prevalence of stigma and discrimination, most sex workers do not disclose their occupational status, and some may avoid seeking health care altogether.[70] Many sex worker-led organizations and IPPF MAs who work with sex workers report stigma and discrimination as some of the biggest barriers to sex workers' right to health, deterring them from accessing the sexual and reproductive health services they need. Stigma and discrimination are extensively documented to significantly impact health.[71]

At the same time, sex workers are subject to violence with widespread impunity, frequently at the hands of law enforcement officers. This is intensified by the criminalization of sex work, which places sex workers in vulnerable situations in which they can be punished and experience negative consequences for reporting abuse and injustices committed against them.

Sex worker human rights defenders can face reprisals for defending the rights of sex workers and forming sex worker-led organizations and unions.[72] Stigma and discrimination can be multiplied by the overlapping identities sex workers have, including their nationality, language spoken, migration status, race, ethnicity, gender identity or expression, sexual orientation, HIV status, disability, and more. Sex workers' families, in particular their children, are often stigmatized, leading to trauma, discrimination and institutional violence against them. The locations where sex work takes place, including places of work, neighbourhoods, brothels, and entertainment areas, can also be stigmatized, and people who visit and work in these locations may be discriminated against. In order to address

[69] Marlise Richter and Kholi Buthelezi (n72).

[70] 'Sex Workers Access to Comprehensive Sexual and Reproductive Health Services' (Global Network of Sex Work Projects, 2018) Briefing Paper <https://nswp.org/sites/default/files/bp_sws_access_to_comp_srh_-_nswp_2018.pdf>

[71] For example, see Mark Hatzenbuehler, Jo C Phelan and Bruce G Link, 'Stigma as a Fundamental Cause of Population Health Inequalities' (2013) 103 American Journal of Public Health 813 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3682466/>; 'Stigma and Discrimination Experienced by Sex Workers Living with HIV' (Global Network of Sex Work Projects 2015) Briefing Paper <https://d8dev.nswp.org/sites/default/files/Stigma%20and%20Discrimination%20Experienced%20by%20Sex%20Workers%20Living%20with%20HIV%20Community%20Guide%2C%20NSWP%20-%20December%202015.pdf>; Michaela Smith and others, 'Prostitution Stigma and Its Effect on the Working Conditions, Personal Lives, and Health of Sex Workers' (2018) 55 The Journal of Sex Research 457 <https://www.tandfonline.com/doi/abs/10.1080/00224499.2017.1393652?journalCode=hjsr20>; Zehnder Mara and others, 'Stigma as a Barrier to Mental Health Service Use Among Female Sex Workers in Switzerland' (2019) 10 Frontiers in Psychiatry <https://www.frontiersin.org/article/10.3389/fpsyt.2019.00032>; Laura Nyblade and others, 'Impact of Stigma on Utilization of Health Services among Sex Workers in Kenya' (Futures Group, Health Policy Project 2015) <https://www.healthpolicyproject.com/pubs/536_KenyaSWStigmaStudyFINAL.pdf>.

[72] 'Sex Worker Rights Defenders at Risk' (Frontline Defenders 2021) <https://www.frontlinedefenders.org/sites/default/files/fld_swrd_final_english.pdf>.

these issues, sex workers recommend using non-discriminatory language and changing social norms and narratives about people who visit or work in these areas.

These barriers are exacerbated for sex workers facing intersecting forms of marginalization, including gender non-conforming and transgender sex workers, Black, Indigenous, and people of colour (BIPOC) sex workers, sex workers with disabilities, sex workers who use drugs, migrant sex workers, sex workers living in poverty and those living with HIV. This is because sex work, like any other type of work, is affected by systemic inequalities, including gender inequality. Sex workers, the majority of whom are cisgender women and/or members of the LGBTIQ+ communities, are essential advocates and partners to IPPF in seeking social, economic and gender justice. Unequal gender and other power relations are foundational to all marketplaces under capitalism, which largely serve to reinforce the economic power of cisgendered men in male-dominated patriarchal societies. Patriarchal social norms, generational poverty, the feminization of poverty, discriminatory migration policies, and political structures exert intersecting forms of oppression, including gender inequalities, on sex workers. These inequalities and structures of power are compounded by others, such as heteronormativity, homophobia, transphobia, xenophobia, racism, classism and gendered familial and social structures that affect the ability of sex workers to enjoy their human rights.

It is essential that comprehensive, cross-sectoral efforts to dismantle unequal power structures in legal, political and social institutions accompany decriminalization of sex work. A critical element of this is comprehensive sexuality education (CSE), which has been proven to foster positive gender equitable attitudes and to prevent and reduce gender-based violence and intimate partner violence. In addition to this, sex workers should be included and supported to meaningfully participate in decision-making bodies and gender justice processes as leaders and change-makers. This is particularly crucial considering the intersecting challenges populations in vulnerable situations face and the centrality of the human rights principle that those directly affected by rights issues should be able to participate and lead.

IPPF is firmly opposed to any form of stigma, discrimination and violence against sex workers, their families and children, and commits to fighting stigma and discrimination, changing social norms and societal attitudes about sex work, and improving access to justice and redress. We will ensure that our SRHR programming, service delivery, research and advocacy contribute to this fight, partnering with organizations and agencies able to contribute to such approaches beyond SRHR, even in contexts where sex work is criminalized. IPPF also supports comprehensive, cross-sectoral efforts to dismantle unequal power structures in legal, political and social institutions as part of the decriminalization of sex work, including changing stigmatizing attitudes about sex work and gender norms.

2. IPPF supports the recognition of sex work as work

Human rights treaties, including Article 23 of the UDHR and Articles 6 and 7 of the ICESCR, enshrine the right to work.[73] These treaties guarantee the right of everyone to the opportunity to gain their living by work which they freely choose or accept, including the right to just and favourable conditions of work, safe and healthy working conditions, equal opportunities, and reasonable limitations on working hours to allow for rest and leisure. This includes people who choose sex work to gain a living, and entitles them to all associated rights regarding working conditions, opportunities, and rest.

Recognizing sex work as work is essential to respecting, protecting and fulfilling the human right to work of sex workers, including free choice of work or employment and entitlement

[73] UDHR (n28); ICESCR (n29).

to labour rights, benefits, and protections that all other workers should receive. All people, including sex workers, are entitled to equal protection before the law, regardless of their occupation. Refusing to recognize certain livelihoods violates the human right to work of those who chose to engage in them, and puts these workers at increased risk of violence, in particular those experiencing intersecting forms of discrimination, such as undocumented migrants and refugees. Due to the criminalization and the lack of recognition of sex work as legitimate form of work in national and local policies, most sex workers are excluded from social protection and social welfare frameworks worldwide,[74] in violation of their human rights. Sex workers are also often denied access to financial services, loans and banking, making them economically vulnerable in numerous ways. They may also be prevented from diversifying their income sources or transitioning to other forms of work due to criminal records related to sex work.

Recognizing sex work as work has the potential to shift power imbalances in sex workers' relationships with state agents, such as law enforcement, who can otherwise use the threat of working 'outside the law' to violate the rights of sex workers. It opens up possibilities for sex workers to improve their working conditions, interact more equitably with other sectors of labour, and be recognized in their communities as workers making a societal contribution. Recognizing sex work as work also allows sex workers to receive, for example, benefits such as maternity leave, occupational health and safety protection, and retirement allocations.

At the same time that sex work is recognized as work, to respect, protect and fulfil the right to work, governments must also address structural inequalities, including gender and racial inequalities that result in women and LGBTIQ+ people finding themselves in situations where they only have a single choice of occupation. Addressing such structural inequalities includes guaranteeing social and economic rights, such as universal access to at least 12 years of education, training and economic opportunities, and supportive policies and services for sex workers to transition to other work if they choose or to diversify their income sources (i.e. working in other sectors while continuing to work in sex work as well).

IPPF supports the recognition of sex work as work and supports sex workers and sex worker-led organizations in advocating for the recognition of sex work as work. Labour and self-employment frameworks provided by states should be available to sex workers, free from measures that would stigmatize or discriminate against them. Sex workers should be guaranteed eligibility for social benefits and protection, while ensuring equal access to labour rights.

3. IPPF condemns forced labour and human trafficking, and supports sex workers in distinguishing between sex work and such violations.

According to the ILO Forced Labour Convention, 1930 (No. 29) ,[75] forced or compulsory labour is
"all work or service which is exacted from any person under the threat of a penalty and for which the person has not offered himself or herself voluntarily." The Forced Labour Protocol (Article 1(3))[76] explicitly reaffirms this definition.

This definition consists of three elements:

[74] 'Unreachable Social Protection for Sex Workers' (United Nations in Viet Nam, 29 November 2021) <https://vietnam.un.org/en/160723-unreachable-social-protection-sex-workers> accessed 25 August 2022.
[75] Convention Concerning Forced or Compulsory Labour, 1930 (No.29) International Labour Organization (adopted 28 June 1930, entered into force 1 May 1932) <https://www.ilo.org/dyn/normlex/en/f?p=NORMLEXPUB:12100:0::NO::P12100_ILO_CODE:C029>
[76] Protocol of 2014 to the Forced Labour Convention, 1930 (adopted 11 June 2014, entered into force 9 Nov 2016) <https://www.un.org/en/development/desa/population/migration/generalassembly/docs/globalcompact/ILO_P_029.pdf>

- Work or service refers to all types of work occurring in any activity, industry or sector including in the informal economy.
- Menace of any penalty refers to a wide range of penalties used to compel someone to work.
- Involuntariness: The term 'offered voluntarily' refers to the free and informed consent of a worker to take a job and his or her freedom to leave at any time. This is not the case for example when an employer or recruiter makes false promises so that a worker takes a job they would not otherwise have accepted, or withholds essential travel documents such as passports.

Human trafficking is defined by international law by the UN Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children (2000)[77] in its article 3 as *"constituting three elements:*

1. *An "action": that is, the recruitment, transportation, transfer, harbouring or receipt of persons;*
2. *A "means" by which that action is achieved (threat or use of force or other forms of coercion, abduction, fraud, deception, abuse of power or a position of vulnerability, and the giving or receiving of payments or benefits to achieve consent of a person having control over another person); and*
3. *A "purpose" (of the action/means): specifically, exploitation. All three elements must be present to constitute "trafficking in persons" under the UN Trafficking Protocol. The only exception is when the victim is a child, in which case the "means" requirement is no longer an element of the crime."*[78]

IPPF condemns in the strongest possible terms all forms of forced labour and human trafficking in all types of work occurring in any activity, industry or sector, including in the informal economy. Sex work, as clearly stated in the Definitions and Concepts section of this policy, does not fall into either of these categories. However, various actors regularly conflate sex work with these violations, to the detriment of sex workers.

Sex worker-led organizations have consistently opposed the conflation of sex work with human trafficking, noting how anti-trafficking initiatives have placed further restrictions on sex work and increased prosecution, particularly among migrant sex workers, including within legalized contexts.[79] There is no evidence that interventions that equate sex work with trafficking eradicate sexual exploitation, forced labour, or human trafficking; on the contrary, these interventions frequently put sex workers at risk and violate their rights.[80] Additionally, anti-trafficking initiatives can lead to discriminatory profiling and increased scrutiny and harassment which restrict the free movement of cisgendered women, transgender people and migrant sex workers.

Migration laws and administrative laws that deny migrants and transgender people proper documentation in line with their gender identity or permission to work greatly exacerbate the vulnerable situation in which migrant and transgender sex workers are placed, providing additional tools of exploitation, coercion, and oppression to perpetrators. Safe migration, in particular for people seeking refuge during humanitarian crisis, including sex workers and transgender people, is an essential element in addressing rights violations.

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[77] Protocol to Prevent, Suppress and Punish Trafficking in Persons Especially Women and Children, supplementing the United Nations Convention against Transnational Organised Crime (adopted November 15 2000, entered into force 25 December 2000) 2237 UNTS 319 <https://www.ohchr.org/en/instruments-mechanisms/instruments/protocol-prevent-suppress-and-punish-trafficking-persons>

[78] Amnesty International (n3) 4-5.

[79] 'The Impact of Anti-Trafficking Legislation and Initiatives on Sex Workers' (n9); 'Surveilled. Exploited. Deported. Rights Violations Against Migrant Sex Workers in Europe and Central Asia' (n9).

[80] Stéphanie Wahab and Meg Panichelli, 'Ethical and Human Rights Issues in Coercive Interventions With Sex Workers' (2013) 28 344.

Due to widespread conflations of sex work with human trafficking, SRH programs for sex workers may even be excluded from international and national HIV and health funding. The most notable policy of this kind is the United States President's Emergency Plan for AIDS Relief (PEPFAR) anti-prostitution and sex trafficking clauses (often called the Anti-Prostitution Pledge),[81] which require non-U.S.-based organizations receiving HIV funding from the U.S. Agency for International Development (USAID) to sign statements that they oppose "the practices of prostitution and sex trafficking" as intertwined elements, in opposition to evidence-based best practices.[82]

IPPF condemns forced labour and human trafficking, clearly distinguishes these violations from sex work, and condemns the conflation of these distinct terms due to the negative effect on sex workers' rights. IPPF supports the human right to freedom of movement, without discrimination, and the inclusion of sex workers as key stakeholders in addressing forced labour and human trafficking from a rights based perspective.

4. IPPF supports the decriminalization of sex work.

IPPF supports the decriminalization of sex work because this is a crucial step in respecting, protecting and fulfilling the human rights of sex workers. Decriminalization is unanimously favoured by every global and regional sex worker-led network as well as countless national-level sex worker-led organizations. It is also supported by major international health and human rights organizations, including WHO, UNAIDS, Amnesty International, the International Lesbian, Gay, Bisexual, Trans, and Intersex Association (ILGA) World, Human Rights Watch, Transgender Europe, and many others.

Decriminalization entails the removal of all criminal and other penalties for any parties engaged in sex work and other restrictions that affect the lives of sex workers (i.e. restrictions on advertising, communication, access to public space, migration, financial institutions, etc), and allows for sex workers' prior criminal records to be expunged. Policies that disproportionately affect sex workers, such as laws against trespassing, vagrancy, loitering, public nuisance, public indecency, drug use, homosexuality, and 'crossdressing,' are also removed as part of decriminalization.[83] Policy environments which decriminalize all aspects of sex work reduce the risk of physical, sexual, mental and other forms of abuse and violence from police, third parties, abusers posing as clients, health providers, the justice system, and members of the public, as well as institutionalized violence and discrimination from government bodies and society at large. Decriminalizing sex work removes major sources of stigma and discrimination against sex workers. It also decreases the chilling effect on reporting violence and discrimination that sex workers experience, and empowers sex workers to report abuse, seek justice and receive assistance.

There is strong evidence regarding the positive impacts of decriminalization on public health and human rights. Modelling estimates have indicated that the decriminalization of sex work could reduce HIV infections by 33 to 46% over the next decade.[84] As attested by UNAIDS, the decriminalization of sex work "is key to changing the course of the HIV epidemics among sex workers and in countries as a whole."[85] In New Zealand, where sex work has been

[81] AAPD 14-04 "Implementation of the United States Leadership Against HIV/AIDS, Tuberculosis and Malaria Act of 2003, as amended – Conscience Clause Implementation, Medically Accurate Condom Information and Opposition to Prostitution and Sex Trafficking" (2014)(revised from AAPD 12-04 and ADS 303) <https://www.usaid.gov/work-usaid/aapds-cibs/aapd-14-04-w>.

[82] UNAIDS Guidance Note on HIV and Sex Work (n15), Annex 3 'Differentiating sex work and trafficking.'

[83] 'Decriminalisation: The Smart Sex Worker's Guide' (Global Network of Sex Work Projects 2022) <https://nswp.org/sites/default/files/sg_to_decriminalisation_prf05.pdf>.

[84] Kate Shannon and others, 'Global Epidemiology of HIV among Female Sex Workers: Influence of Structural Determinants' (2015) 385 The Lancet 55.

[85] 'Services for Sex Workers' (Joint United Nations Programme on HIV/AIDS 2014) Guidance Note 3.

decriminalized since 2003, street based sex workers are much more likely to report violence they experience to the police.[86] Decriminalization of sex work in New Zealand ended the practice of courts removing sex workers' children from their homes and care simply because parents were found to be, or suspected to be, sex workers.[87] In New South Wales (NSW), Australia, decriminalization of sex work improved worker safety and health interventions in comparison to other legislative models in the country, and reduced incidents of police corruption to zero (previously police corruption had been a significant issue for sex workers in NSW).[88]

It is important to note that decriminalization of sex work is essential, but it does not guarantee the full enjoyment of sex workers' human rights. Decriminalization should be a first step to achieve equality and social justice for all people, including sex workers, without any kind of discrimination. As such, full workers' rights and social protections in line with international agreements, such as the ILO Decent Work agenda,[89] should be guaranteed to sex workers in all countries. Decriminalization has the potential to prevent active harm to sex workers' human rights, but in order to guarantee equality of rights and equal protection of the law, sex work must also be recognized as work (see Position #2 below).

IPPF does not support the criminalization of sex work because it is incompatible with respecting, protecting and fulfilling the human rights of sex workers.

There are many legislative and policy approaches in which sex workers lives can be criminalized, but the end effect is the same. Sex workers' rights can be violated either directly through laws prohibiting the sale of sexual services, solicitation, advertisement, or working collectively with other sex workers. They may also be criminalized through laws targeting other parties such clients or venues, or through restrictions on living from the proceeds of sex work. Some laws, including those very frequently used against transgender and gender non-conforming people, condone police action based solely on the subjective assumptions from law enforcement about who is a sex worker (through appearance or activity) in public space. Sex workers' freedom of movement may also be curtailed via laws and local restrictions on trespassing, vagrancy, loitering, public nuisance, public indecency, and the congregating of people who have been previously arrested or are assumed to be a sex worker by the police.[90]

Criminalization of sex work reinforces societal biases which portray sex workers as 'deviant' or 'immoral,' exacerbating violence, discrimination, and stigma against them, while hampering their access to health, social services and justice.[91] Criminalization has a negative impact on sex workers' right to family life, both through direct violations and through the stigma it fuels. Many sex workers have their parental rights restricted or denied

[86] Lynzi Armstrong, 'From Law Enforcement to Protection? Interactions Between Sex Workers and Police in a Decriminalized Street-Based Sex Industry' (2017) 57 The British Journal of Criminology 570 <https://doi.org/10.1093/bjc/azw019>.
[87] Stéphanie Wahab and Gillian Abel, 'The Prostitution Reform Act (2003) and Social Work in Aotearoa/New Zealand' (2016) 31 Affilia 418.
[88] Christine Harcourt and others, 'The Decriminalisation of Prostitution Is Associated with Better Coverage of Health Promotion Programs for Sex Workers' (2010) 34 Australian and New Zealand Journal of Public Health 482 <https://doi.org/10.1111/j.1753-6405.2010.00594.x>; Basil Donovan and others, 'The Sex Industry in New South Wales' (The Kirby Institute, Faculty of Medicine, University of New South Wales 2012) A Report to the NSW Ministry of Health <https://kirby.unsw.edu.au/sites/default/files/kirby/report/SHP_NSW-Sex-Industry-Report-2012.pdf>.
[89] 'Decent Work' (International Labour Organization, 2015) <https://www.ilo.org/global/topics/decent-work/lang--en/index.htm> accessed 23 August 2022.
[90] Fiona Scorgie and others, 'Human Rights Abuses and Collective Resilience among Sex Workers in Four African Countries: A Qualitative Study' (2013) 9 Global Health <https://doi.org/10.1186/1744-8603-9-33>.
[91] ibid

if they are arrested, charged or suspected of engaging in sex work.[92] Sex workers' children are denied, as a result of stigma, access to education and health care.[93] Sex workers' health and safety are jeopardized, increasing their risk of HIV, STIs, and sexual and physical violence. Police may confiscate condoms, safe sex information and medications, and use them in courts as evidence.[94] Punitive policies relating to HIV and STI exposure, non-disclosure, and transmission deter sex workers from seeking testing, treatment and care for fear of legal consequences.[95] Criminalization also poses challenges for outreach, hampering sex workers' access to health services. Health care providers in general, and sex worker peer health care providers in particular, face policing and other reprisals when conducting outreach to communities of sex workers.[96]

Criminalization fosters a climate of impunity for perpetrators of violence, as sex workers must work clandestinely and may not report abuse due to fears of legal repercussions.[97] Sex workers whose rights are violated by the police and the judicial system often have no legal recourse at all.

Even where sex work is considered only an administrative offence in local legislation, such as via ordinances concerning 'public order,' sex workers are still targeted. In these situations, sex workers are subjected to harassment, extortion, illegal detainment, and violence perpetrated by police and other law enforcement officials on the basis of these local regulations.[98]

IPPF does not support other criminalizing approaches such as 'ending demand,' the Nordic Model, and the 'equality model' because they are incompatible with respecting, protecting and fulfilling the human rights of sex workers.

The idea that there is a distinction between 'full' and 'partial' criminalization is sometimes part of discussions of legal frameworks. Sex worker-led organizations reject this notion, explaining that any degree of criminalization harms sex workers and renders them more susceptible to other forms of legal oppression.[99] Evidence shows that any model in which

[92] G Ragesh, 'Human Rights Violations against Female Sex Workers by Police Personnel' (2015) II International Journal of Research and Scientific Innovation 101; Lauren Medlicott, 'Abused and Denied Help: Sex Worker Mums Lose Access to Kids' (openDemocracy, 25 July 2022) <https://www.opendemocracy.net/en/5050/sex-work-social-services-mothers-children/> accessed 25 August 2022.

[93] Marlise Richter and Kholi Buthelezi, 'Stigma, Denial of Health Services, and Other Human Rights Violations Faced by Sex Workers in Africa: "My Eyes Were Full of Tears Throughout Walking Towards the Clinic That I Was Referred To"' in Shira M Goldenberg and others (eds), Sex Work, Health, and Human Rights: Global Inequities, Challenges, and Opportunities for Action (Springer Cham 2022) <https://doi.org/10.1007/978-3-030-64171-9_8>.

[94] Skye Wheeler, 'Interview: Outlawed and Ostracized: Sex Workers in South Africa' (Human Rights Watch 2019) <https://www.hrw.org/news/2019/08/07/interview-outlawed-and-ostracized-sex-workers-south-africa> accessed 25 August 2022; Sharmus Outlaw and others, 'Nothing About Us, Without Us: Sex Work, HIV, Policy Organizing' (Best Practices Policy Project and Desiree Alliance 2015) Transgender empowerment <http://www.bestpracticespolicy.org/wp-content/uploads/2015/10/NOTHINGABOUTUS_REPORT_COLOR_2015.pdf>.

[95] Lucy Platt and others, 'Associations between Sex Work Laws and Sex Workers' Health: A Systematic Review and Meta-Analysis of Quantitative and Qualitative Studies' (2018) 15 PLOS Medicine <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6289426/>.

[96] Outlaw (n80).

[97] Ragesh (n70).

[98] 'Issledovanie Sredi Seks-Rabotnikov Ukrainy Po Narusheniyam Prav Cheloveka so Storony Sotrudnikov Militsii' (Kirovohrad Regional Branch of the Charitable Organisation "All-Ukrainian League" LEGALIFE 2014) <https://www.nswp.org/node/2351>; 'Failures of Justice: State and Non-State Violence against Sex Workers and the Search for Safety and Redress' (SWAN 2015) <https://swannet.org/resources/failures-of-justice-state-and-non-state-violence-against-sex-workers-and-the-search-for-safety-and-redress-2/>.

[99] 'Sex Work and the Law: Understanding Legal Frameworks and the Struggle for Sex Work Law Reforms' (Global Network of Sex Work Projects 2014) Briefing Paper <https://www.nswp.org/resource/nswp-publications/sex-work-and-the-law-understanding-legal-frameworks-and-the-struggle-sex>.

the sale, purchase, or benefit from sex work is criminalized does not stop sex workers from working and does not eliminate sex work.[100] Moreover, these forms of criminalization have a negative effect on sex workers' health, wellbeing and livelihood. Their vulnerability to violence and other rights violations is increased as they are forced to work clandestinely and take risks to mitigate the consequences imposed on them by these kinds of criminalization.[101]

Criminalizing any element of sex work turns sex work into a criminal business exchange. It is not possible to criminalize only one half of a transaction without stigmatizing the other half and without increasing sex workers' risk and vulnerabilities to violence and discrimination in the transaction as well. These approaches are often justified by conflating trafficking with sex work and portraying sex workers either as victims to be rescued or criminals deserving of mistreatment, rather than human beings with dignity, agency and rights. Such conflation also often drives xenophobic migration policies that treat migrant women inherently as victims who must be saved, and lead to violations of their right to freedom of movement. Even those penalties criminalizing those who profit from sex work, while intended to punish those who 'exploit' or 'force' people into sex work, have negative consequences: it criminalizes sex workers who take collective action in order to create safe and empowered workplaces, as well as non-exploitative third parties. 'End demand' approaches have had a serious negative impact on parental rights in Nordic countries, as sex workers are seen as victims and incapable of being parents.[102] This increases social stigmatization and creates jurisprudence in violation of sex workers' human rights.

IPPF does not support regulation that treats sex work as different from other forms of labour because it is incompatible with respecting, protecting and fulfilling the human rights of sex workers.

It is important to distinguish between the decriminalization and legalization of sex work as two distinct legislative models, even though some elements overlap. Decriminalization removes all criminal and administrative penalties for sex work, as well as civil and other law/policies that have a punitive or punishing effect on sex workers, while legalization often introduces laws which permit sex work under highly regulated and often very restrictive conditions, which treat it differently from other forms of labour.

Officially, regulatory frameworks are promoted as a means to protect sex workers and the public by enforcing health and safety standards. Legalization has also been promoted as a means of combatting human trafficking.[103] However, numerous concerns exist in regards to the unintended negative human rights impacts and implications of legalization. In practice, these frameworks reinforce the idea that sex work is inherently different than other forms of work. One of the main impacts is that legalization policies frequently foster a two-tier system in which some sex workers are able to work legally, while others are pushed

100 'The Impact of "End Demand" Legislation on Women Sex Workers' (Global Network of Sex Work Projects, 2018) Policy Brief <https://nswp.org/resource/nswp-policy-briefs/policy-brief-the-impact-end-demand-legislation-women-sex-workers>; 'Smart Guide on Challenging the Introduction of the Nordic Model' (Global Network of Sex Work Projects 2017) <https://nswp.org/resource/nswp-smart-guides/smart-sex-workers-guide-challenging-the-introduction-the-nordic-model>.

101 For example, a Swedish sex worker and human rights advocate, Petit Jasmine, was forced to interact with her violent ex-husband in order to see her children. She had been separated from them by social services because he told them about her work. He murdered her during a custodial visit. Melissa Gira Grant, 'Sex Workers Rise Up After Fatal Stabbings' (In These Times, 22 July 2013) <https://inthesetimes.com/article/sex-workers-rise-up-after-fatal-stabbings>.

102 'The Real Impact of the Swedish Model on Sex Workers: Sex Work and Arbitrary Interference with Familes' (Global Network of Sex Work Projects 2015) <https://nswp.org/resource/nswp-publications/community-guide-the-real-impact-the-swedish-model-sex-workers>.

103 A.L. Daalder, 'Prostitution in the Netherlands since the Lifting of the Brothel Ban' (WODC 2007) <https://publikationen.uni-tuebingen.de/xmlui/bitstream/handle/10900/66769/ob249a_fulltext_tcm45-83466.pdf?sequence=1>.

underground into illegal and often precarious environments.[104] Even those that legally maintain rights under this framework are further subjected to high levels of stigma, discrimination and violence from state authorities and abusers posing as clients.[105]

In some contexts, sex workers who do not, or are unable to, comply with legal regulations may still be subject to the same penalties as those working in criminalized contexts. Legal regulations can be onerous and subject to local interpretations or manipulation that can affect the rights of sex workers. In many jurisdictions where sex work is legalized, sex workers must register with the police and/or health authorities in order to work legally. This can expose sex workers to increased police surveillance and breaches in confidentiality. Registration requirements are particularly problematic for migrant sex workers[106] and others who may lack the necessary working permits and/or health insurance to comply with regulations.

Compulsory HIV and STI testing and treatment policies are violations of human rights and constitute coercion. These policies are often a feature of legalization models.[107] Although these enforced practices are aimed at promoting public health, there is no evidence that they reduce HIV and STI rates.[108] They constitute violations of sex workers' rights to privacy, bodily integrity, and health, and have been classified as torture in some jurisdictions.[109]

In some legalization models, failure to submit to periodic HIV and STI screenings can result in administrative fines, loss of registration, or in the case of migrant workers, deportation. This forces sex workers to go underground. Compulsory testing and treatment policies not only reinforce the pathologisation of sex workers as 'vectors of disease,' but detract attention and resources from their actual clinical and support service SRH needs. Results of tests should be confidential in all cases, but unauthorized disclosure results in violence and discrimination from police, health providers and society, driving sex workers underground and further discouraging them from accessing health care, in violation of their human rights.

IPPF supports legislative models that respect, protect and fulfil sex workers' human rights, and which demonstratively decrease violence, discrimination and abuse, since stigmatization and violence are some of the largest structural

[104] This outcome can be witnessed in Germany, where the 2017 'Prostitute Protection Act' requiring sex workers to register with local authorities has proven largely unsuccessful, leaving the vast majority of the country's estimated 200,000 sex workers to work illegally. 'Germany: Prostitute Protection Laws Proving Impotent' (DW.COM, 18 February 2019) <https://p.dw.com/p/3DYdP> accessed 25 August 2022.Data from Austria has similarly suggested that 86% of the country's sex workers operate outside of the registration system. 'Austria: Discriminations against Sex Workers in the Rights to Work and to Health' (Sex-Worker Forum of Vienna, Austria 2013) <https://www.nswp.org/sites/default/files/SWFofViennashadow%20CEDAW%202013.pdf>.

[105] Ellen Foley, 'Regulating Sex Work: Subjectivity and Stigma in Senegal' (2017) 19 Cult Health Sex 50.

[106] 'Sex Work in Europe: A Mapping of the Prostitution Scene in 25 European Countries.' (TAMPEP International Foundation 2009) <https://tampep.eu/wp-content/uploads/2017/11/TAMPEP-2009-European-Mapping-Report.pdf>; 'Sex Workers' Access to Comprehensive Sexual and Reproductive Health Services' (Global Network of Sex Work Projects 2018) Briefing Paper <https://nswp.org/resource/nswp-briefing-papers/briefing-paper-sex-workers-access-comprehensive-sexual-and-reproductive>.

[107] 'Sex Work Is Legalised in Senegal' (Global Network of Sex Work Projects, nd) <https://nswp.org/timeline/sex-work-legalised-senegal> accessed 25 August 2022.

[108] Elena Jeffreys, Janelle Fawkes and Zahra Stardust, 'Mandatory Testing for HIV and Sexually Transmissible Infections among Sex Workers in Australia: A Barrier to HIV and STI Prevention' (2012) 2 World Journal of AIDS <https://www.scirp.org/journal/PaperInformation.aspx?PaperID=22595>; 'HIV and STI Testing and Treatment Policies' (Global Network of Sex Work Projects 2015) Briefing Paper <https://www.nswp.org/sites/default/files/HIV%20and%20STI%20Testing%20and%20Treatment%20Policies%2C%20NSWP%20-%20December%202015.pdf.>.

[109] 'Austria: Discriminations against Sex Workers in the Rights to Work and to Health' (Sex-Worker Forum of Vienna, Austria 2013) <https://www.nswp.org/sites/default/files/SWFofViennashadow%20CEDAW%202013.pdf>.

barriers sex workers and their families face. Therefore, IPPF supports the decriminalization of sex work as essential to promoting sex workers' health and human rights.

5. **IPPF supports sex worker-led and centered SRHR programming and service delivery.**

The WHO's *Consolidated Guidelines on HIV prevention, diagnosis, treatment and care for key populations*[110] stresses the importance of promoting community-led health services and programs, including for SRH and HIV services. In regards to sex workers, WHO recommends that programming for sex workers be comprehensive and include the whole portfolio of SRHR services.[111]

Sex workers, in all their diversity, have a broad range of SRH needs which are often ignored in favour of narrowly focused HIV and STI care and programming. Furthermore, sex workers' needs may be disregarded entirely by some health providers due to stigmatization and discrimination. IPPF's rights-based participatory programming strives to place sex workers' lived experiences at the center and ensure meaningful engagement of sex workers across all stages of the programming cycle, from research and strategy design to implementation and evaluation. This means considering sex workers' health and wellbeing as embedded in the social and political contexts in they which live.

To serve sex workers, IPPF takes an intersectional lens, considering not only the accessibility, availability, acceptability, and quality of health care services, but also the multiple identities and layers of oppression experienced by sex workers, which serve as barriers to access, such as those based on gender identity and expression, sexual orientation, occupation, race, ethnicity, ability, relationship status, migration status, language, poverty, the feminization of poverty and economic status, among others. In line with this approach, IPPF commits to the following in all service provision:

- Respect for all
- Zero tolerance towards discrimination
- Dignified care
- Empowering people in sex work for accessing health
- Working to dismantle barriers for sex workers to access health care and services, including combatting stigma and discrimination
- Integrating SRHR and related health strategies within universal health coverage, which are specifically tailored to the needs of people engaged in sex work

IPPF will implement and advocate for sex worker programming that includes comprehensive health care and prevention models that address sex workers' needs (for instance, in terms of opening times and high standards of privacy and confidentiality) and accessible and non-discriminating clinical and support[112] services, encouraging regular training of health care workers on sex workers' rights and needs. IPPF recognizes that many SRH programs are often still not intersectional in practice,[113] and will strive to integrate an intersectional approach in all service provision and advocacy.

[110] 'Consolidated Guidelines on HIV Prevention, Diagnosis, Treatment, and Care for Key Populations' (n11).
[111] Also known as the Sex Worker Implementation Tool or SWIT. 'Implementing Comprehensive HIV/STI Programmes with Sex Workers: Practical Approaches from Collaborative Interventions' (n11).
[112] Including HIV treatment and care, STI screening and asymptomatic treatments, prevention services for safe sex behaviour (ie free condoms and lubricants), immunization for Hepatitis B, community outreach programmes, harm reduction for alcohol and drug users, and the application of WHO recommended guidelines for HIV and STI management for sex workers.
[113] See for example, Rachel G Logan and others, 'When Is Health Care Actually Going to Be Care?' The Lived Experience of Family Planning Care among Young Black Women' (2021) 31 Qualitative Health Research 1169 <https://doi.org/10.1177/1049732321993094>.

IPPF commits to meaningfully engage sex workers and sex worker-led organizations in programming and service delivery. IPPF commits to investing in rights-based, community-led SRHR programming and to directly invest in programs led by sex worker-led organizations. IPPF will advocate for governments, organizations and health providers to apply a sex worker-centered approach to health programming and service delivery.

6. **IPPF supports sex workers' leadership, community empowerment, and organizational sustainability.**

IPPF acknowledges the agency, leadership and determination of the sex workers' movement to fight for their rights amid the human rights abuses and violations sex workers are subjected to on a daily basis across the world. IPPF considers it essential to work with sex workers as leaders and agents of change. This includes being inclusive of sex workers in IPPF's own organizational decision making structures at the highest level and in our advocacy and programming.

Sex workers' leadership must be prioritized in all discussions, policies, and programming which concerns their lives. Organizations must treat sex workers as the experts they are and meaningfully engage them and their rights-based organizations as equal collaborators from the outset of any initiative. This goes beyond working solely on the issues of sex work, and includes acknowledging sex workers' expertise in programming in general; for example, in labour organizing. The principles of sex workers' meaningful involvement and assessment tools to gauge progress have already been developed by sex worker-led organizations, and these must be implemented.[114]

Direct investments in sex worker-led organizations and programming have yielded gains in sex workers' health and human rights, while strengthening community capacity. Nevertheless, sex workers are routinely excluded from these opportunities, or may be invited to participate in ways which are tokenistic and superficial. This exclusion not only hampers the promotion of rights-based SRH and threatens the ability to address the needs, priorities, and lived experiences of sex workers, but also weakens trust and harms the sustainability of partnerships with sex workers.

Community empowerment[115] refers to the process by which sex workers take leadership and ownership of programs, advocacy and policy making, and collectively take action to address structural barriers to their health and human rights.[116] Community empowerment is also listed as a critical factor within WHO's *Consolidated Guidelines on HIV prevention, diagnosis, treatment and care for key populations*.[117]

Key elements of community empowerment of sex workers include:

- Promoting the self-organization, collectivisation, and self-determination of sex workers
- Removing barriers to the full participation of sex workers
- Strengthening partnerships between sex workers, governments, civil society, and other stakeholders
- Supporting the leadership of sex workers in all processes and discussions which concern their lives including regulations and legislation
- Promoting the meaningful participation of sex workers in all aspects of program design, implementation, management and evaluation

[114] 'Meaningful Involvement of Sex Workers' (Global Network of Sex Work Projects 2018) Briefing Note <https://nswp.org/resource/nswp-briefing-notes/meaningful-involvement-sex-workers>.
[115] 'Prevention and Treatment of HIV and Other Sexually Transmitted Infections for Sex Workers in Low- and Middle-Income Countries (n5) 19-20.
[116] 'Implementing Comprehensive HIV/STI Programmes with Sex Workers: Practical Approaches from Collaborative Interventions' (n11) 5.
[117] 'Consolidated Guidelines on HIV Prevention, Diagnosis, Treatment, and Care for Key Populations' (n11).

- Investing resources directly in sex worker-led organizations and communities[118]
- Commitment to economic empowerment of sex workers
- Acknowledging and including sex workers as leaders at the highest levels in decision-making

Community empowerment and meaningful partnerships require sustained, long-term efforts. Sustainability goes beyond achieving decriminalization, and partnerships must be continuous and provide long-term support to combat relentless attempts at retrogression. Moreover, given the heterogeneous and transient nature of many sex worker communities and that legal, social, and economic barriers to collectivization vary, there is no 'one-size-fits-all' approach to partner with sex worker-led organizations. Even in difficult contexts, collectivization should be supported and partnerships with sex workers should be sought. Including capacity building for sex worker-led organizations, such as organisational development, in programming and advocacy is an essential strategy for the sustainability of sex workers' organizations.[119]

IPPF is committed to uphold sex workers' leadership and community empowerment and supports their right to collectivization, self-organisation and self-determination. IPPF will seek long-term partnerships with sex worker-led organizations and support their sustainability.

7. IPPF supports feminist movements which stand in solidarity with sex workers.

IPPF commits to contributing to feminist movements which stand in solidarity with sex workers, advocating with allies and coalitions in support of sex workers' rights. IPPF will work in partnership with sex workers' organizations to amplify their demands through joint advocacy, and through advocating for sex workers' direct involvement in spaces where they are excluded.

Advocacy efforts in coalition and through partnerships have the potential to play a vital role in promoting access to services, mobilizing funding, raising awareness of human rights violations, and influencing policy. As an SRHR leader, IPPF will open dialogues to discuss sex work and will join efforts convening governments, national, regional and international organizations, nurturing partnerships to increase understanding and taking action in favour of sex workers' rights. IPPF will consistently advocate for sex workers' rights but will never speak on behalf of sex workers themselves.

IPPF will establish partnerships with feminist movements, recognizing that there is antagonism between positions on sex work, and will aim to be a vehicle of dialogue when circumstances permit, in consultation with sex worker-led organizations.

IPPF will continue to work in partnership with feminist movements and advocate for the inclusion and meaningful involvement of sex workers in policy discussions and advocacy, strengthening dialogue and partnerships between sex workers, governments, civil society, and other stakeholders.

As adopted by the Board of Trustees, November 2022

[118] 'Implementing Comprehensive HIV/STI Programmes with Sex Workers: Practical Approaches from Collaborative Interventions' (n11) 4.
[119] ibid 125.