A BOLD AND INDEPENDENT VOICE FOR THE RIGHTS OF WOMEN AND GIRLS

IWHC.org
@IntlWomen
Facebook: International Women’s Health Coalition
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OUR VISION

A JUST AND SUSTAINABLE WORLD WHERE ALL PEOPLE, REGARDLESS OF GENDER, ENJOY THEIR HUMAN RIGHTS AND HEALTH, AND HAVE POWER OVER THEIR LIVES.

OUR MISSION

IN ORDER TO ACHIEVE GENDER JUSTICE, IWHC ADVANCES THE SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS OF WOMEN AND ADOLESCENT GIRLS BY:

+ Funding and supporting feminist leaders, organizations, and movements, primarily in the Global South.

+ Advocating for international and US policies, programs, and funding, and holding governments to their commitments.

+ Generating knowledge and leading dialogues on critical and emergent issues.
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As I write, the COVID-19 pandemic is claiming lives and overwhelming health systems worldwide, reaffirming that our mission is more crucial than ever. In this fight, as with so many others, women are on the frontlines.

2019 started with a courageous display of solidarity as 5 million Indian women joined hands in Kerala, creating a 385-mile long “women’s wall” in support of gender equality. Initially conceived as a protest against gender discrimination at a sacred temple, the demonstration evolved into a triumphant rebuke against patriarchal oppression. It was a stunning sight to behold.

Globally, the women’s movement made great strides. Austria, Ecuador, Northern Ireland, and Taiwan all legalized same-sex marriage. The Mexican state of Oaxaca, Australia’s New South Wales, and Northern Ireland decriminalized abortion, while others liberalized their laws, expanding the circumstances in which abortion can be obtained. Persuaded and pressured by the women’s movement, governments are increasingly aware that reproductive rights—and abortion access specifically—are central to the full realization of gender equality, and are acting on this knowledge.

In 2019, the International Women’s Health Coalition (IWHC) maintained our focus on mobilizing at the United Nations; global agreements reached there can have a significant impact on large-scale, national-level policies and budgets. We secured a hard-fought victory when 193 governments agreed to putting gender equality, sexual and reproductive health, and reproductive rights at the center of policies to achieve universal health coverage (UHC). The Alliance for Gender Equality and UHC—a coalition co-founded and led by IWHC, worked tirelessly to achieve this groundbreaking commitment.

But challenges remain. In 2019, IWHC and our grantee partners fought back against restrictive government policies, barriers to reproductive health services, and gender discrimination. From Pakistan to Nigeria and Brazil to Fiji, we fought stigma and challenged engrained gender norms through education, dialogue, and advocacy.

In Washington, DC, we continued to advocate against the deadly Global Gag Rule. In March, I testified before the House of Representatives Appropriations Committee, presenting our evidence on the harm the Global Gag Rule inflicts on women and girls worldwide. We also brought our grantee partners to Capitol Hill to advocate alongside us in meetings with congressional representatives, where our partners shared firsthand accounts of the impact of the policy in their communities.

2019 was also a year of growth for IWHC. We developed a new strategic plan that strengthened our commitment to gender justice and refined our strategies for achieving it. Quite simply, we are prioritizing support to feminist movements because they drive change. We’re doubling down on our commitment to abortion.
rights and access, because the ability to make decisions about whether and when to have a child is fundamental to anyone’s freedom as a human being. And we’re focusing on bodily autonomy, especially for adolescent girls and other typically disempowered individuals, because everyone, everywhere, has the right to make informed decisions about their reproduction, sexuality, health, and lives.

More than ever we’re seeing the impact of our joint advocacy and grantmaking. By aligning our funding with our US-based and global advocacy work, we multiply our impact and help unite an ever-growing coalition behind a bold, shared agenda. Together, we’re strengthening the movement and building a feminist future.

Thank you for your dedication, resolve, and support.

FRANÇOISE GIRARD
For the past five years
I’ve had the honor of being a member of the board of the International Women’s Health Coalition. During this time, I’ve witnessed IWHC’s commitment to feminist values and impact at the global, national, and local levels. IWHC is a unique force for women’s rights and sexual and reproductive health and rights worldwide—both as an advocate and a grantmaker. This is why I did not hesitate to step into the role of board chair; I know what a difference IWHC makes.

I transitioned into my new role at a critical juncture—the development of IWHC’s new 5-year strategic plan. Through this collaborative undertaking with staff and board, I gained new insight into our strengths, strategies, and, of course, the enormous challenges we must overcome in a world that is too often hostile to the basic rights and freedoms that women and girls deserve. As we work together to implement our new strategic plan, I am confident that IWHC is more prepared than ever to advance gender justice.

With 25 years of experience in the health care sector, I know firsthand the power of sexual and reproductive health and rights, and the work needed to reach our goals. I’ve had the
pleasure of meeting IWHC’s grantee and advocacy partners, and I know that IWHC’s power is in the global sisterhood that we have helped to sustain.

I recently returned from Argentina, where I had the pleasure of joining IWHC staff and meeting with grantee partners. For more than twenty years, IWHC has worked with the key actors in the women’s movement there, building support for a national campaign for safe and legal abortion. It was inspiring to be in Argentina in the midst of this historic effort, where I shared the powerful experience of participating in the joyful yet determined march on International Women’s Day, as activists prepared for a new push for decriminalization. I heard multiple times from long-term partners like Catolicas por el Derecho a Decidir-Argentina (CDD-Argentina) about how unique and valuable IWHC’s approach to trust-based and flexible grantmaking is, and how critical the longstanding relationships have been for their success.

My time in Argentina illustrated more clearly than ever the power of feminist organizing, and why strengthening women’s movements is at the core of IWHC’s mission to achieve gender justice. As Marta Alanis, the founder of CDD-Argentina and 2019 Joan B. Dunlop honoree, shared with me, it is the vision of a “feminist world” and the power of the most globalized movement on the planet that sustains this work. I am truly in awe of the work that our partners are undertaking worldwide and the role we play to support and advance their agendas.

While we recognize the challenges of our current climate, and are realistic about the obstacles to achieving our goals in a world still struggling with the COVID-19 pandemic, we are confident that the global feminist movement will play a key role in shaping the future of a more sustainable, just, and equal world. As I assume my role as IWHC board chair, I am deeply grateful to the women worldwide who are shaping our future, and to our friends and allies for their tireless support.

Thank you for your solidarity.
A Strategic Plan for Our Future

IWHC advocates fearlessly, funds strategically, and partners with feminists globally to advance sexual and reproductive health and rights.

In 2019, we undertook an ambitious strategic planning process that resulted in a new 5-year plan, launched in 2020, to strengthen the feminist movement for years to come. We know that the feminist movement is the most effective driver of progress on women’s rights,* and we’re committed to building a well-resourced, intergenerational, and sustainable global movement. To reach our goals we’ve built broad-based coalitions domestically and internationally, served as an advocate for trust-based grantmaking to feminist movements worldwide, and supported the leadership of new and emerging advocates from 32 countries.

COLLECTIVE ACTION IS KEY TO CHANGE

IWHC understands the interconnectedness of struggles across the globe. Our global reach and collective approach enable us to play a critical role in building and strengthening movements through knowledge exchange, convenings, and coalition building.

Our Goals

**GOAL 1**
Feminist movements are resourced, intersectional, and powerful; have leadership that is diverse and inclusive; and work in cross-movement coalitions.

**GOAL 2**
Strengthen norms, laws, policies, and discourses that advance abortion as a human right.

**GOAL 3**
Bolster norms, laws, policies, and discourses that advance the right of women, girls, and marginalized people to celebrate and make decisions about their sexuality and reproduction.

**GOAL 4**
IWHC will have the profile, agility, coordination, and values alignment to lead the fight for gender justice worldwide.
Strengthening the Feminist Movement

Advocacy in Practice:
Building Young Feminist Leaders

A strong feminist movement requires an intersectional and intergenerational approach. IWHC is dedicated to training and supporting the next generation of feminist leaders.

2019 Advocacy in Practice participants.
Through our flagship Advocacy in Practice (AIP) program, IWHC equips emerging feminist leaders with the skills and confidence to advocate for their rights at the United Nations and beyond. Through our three-day intensive training, participants learn the nuances of UN language and negotiations and how to best leverage communications for advocacy. AIP alumni have gone on to become members of parliament, represent their countries at the UN, and employ their skills as advocates for human rights worldwide. In addition to the skills training, AIP helps build solidarity across the feminist movement with activists from each region of the world sharing their stories, victories, and lessons learned, resulting in a stronger and more effective movement at all levels.

In 2019, IWHC held two distinct trainings, including an AIP 2.0 for alumni who sought to further develop their UN-based advocacy skills specifically related to universal health coverage. The result was a groundbreaking victory in which UN Member States made strong commitments to prioritize gender equality—and sexual and reproductive health and rights, specifically—in health programs and budgets. More details about AIP and our universal health coverage advocacy on page 21.

“I cannot quite put in words how the AIP experience has impacted my career. Apart from honing my skills in lobbying and advocacy at the UN, I have extended my networks, learned from my peers and seniors, and sharpened my coalition building skills…My sincere gratitude to IWHC for being that stepping stone I needed at this time in my career and thanks for connecting me with the AIP class of 2019, in them I found lifelong sisters.”

Patricia Nudi, 2019 AIP & AIP 2.0 participant; Advocacy Officer, Kisumu Medical and Education Trust (KMET), Kenya

Patricia lives in Kisumu, Kenya where she leads advocacy at the Kisumu Medical and Education Trust, an IWHC grantee partner. She’s pushing to increase access to education and reproductive health care for her community, where there is a significant unmet need for contraceptives and high levels of unplanned pregnancy, especially among adolescent girls.

In 2019, Patricia took part in IWHC’s Advocacy in Practice training, and an advanced AIP 2.0 workshop, where she learned to advocate for gender equality and universal health coverage at the United Nations. Through this work she learned how to persuade policymakers to act on women’s rights and saw firsthand the impact that global policy can have on local communities. Through AIP, what started as a passion to support her community has translated into a career with global impact.
In 2019, IWHC had our largest ever grant budget and distributed more than $2.8 million in grants to more than 100 organizations and individual activists around the world. From Brazil to Lebanon and Poland to Fiji, our trust-based grantmaking enabled our partners to strengthen comprehensive sexuality education, combat conservative attacks, and increase access to sexual and reproductive health services and information in their communities.

Our relationship with our grantee partners extends beyond just funding. We are partners in advocacy. In 2019, we worked together to ensure that US and global policies prioritized the health and rights of women, girls, and gender diverse people by documenting the negative impacts of Trump administration policies like the Global Gag Rule, advocating to advance abortion rights—including the right to self-managed abortion—and holding governments accountable to their human rights commitments.

**IWHC provides grants to feminist organizations and activists to drive progress on gender justice worldwide.**
Trust in Action

TRUST-BASED GRANTMAKING:
A grantmaking model anchored in giving flexible, multi-year, core funding and providing support “beyond the check,” through ongoing mentorship and capacity-building.

Strengthening the Feminist Movement

Nwabisa Dlova from IWHC grantee Masimanyane Women’s Rights International engages students on issues of sexuality and reproduction.

$I 1.7\ million$
GENERAL OPERATING SUPPORT

47
GRANT RENEWALS
TO EXISTING PARTNERS

59%
HAVE BEEN
FUNDED FOR 5+ YEARS

$51,325
AVERAGE GRANT SIZE
FIGHTING FOR ABORTION RIGHTS

A 35-Year Commitment to Abortion Rights

Since our founding in 1984, IWHC has fearlessly advocated for access to abortion to be recognized as a human right and to ensure that people worldwide can terminate their pregnancy if desired.

The power to make decisions about your own body, including whether and when to have a child, is fundamental to your freedom and dignity. In 2019, against the backdrop of increasing authoritarianism and the proliferation of anti-rights policies globally, IWHC stood strong for abortion rights. Through our grantmaking we supported our partners’ efforts to confront restrictive government policies, overcome barriers to abortion access, and advocate for decriminalization. Together with our partners we fought against dangerous and unethical refusals to provide abortion care and the Trump administration’s deadly Global Gag Rule. Our domestic and global advocacy complimented this work as we pushed to decrease stigma and ensure support for safe and legal abortion at the United Nations and in US foreign policy.

In Washington, DC, we joined more than 75 reproductive rights organizations to develop the Blueprint for Reproductive Health, Rights, and Justice—a bold vision for domestic and US foreign policy. Our efforts focused on increasing access to safe and legal abortion, and specifically self-managed abortion, both within the US and globally.

USING SOCIAL MEDIA TO SECURE HUMAN RIGHTS

When the Kenyan government suddenly and unexpectedly banned Marie Stopes International from providing legal abortion and post-abortion care, IWHC grantee Trust for Indigenous Culture and Health (TICAH) mobilized allies and launched a social media campaign to urge the government to reverse the ban. The government heeded their demands in a victory for reproductive rights, the women’s movement, and the rule of law.
Galvanizing Action Against the Global Gag Rule

The Trump administration’s deadly Global Gag Rule is depriving women and girls of essential information and health care services, and stripping them of the right to make decisions about their own bodies. Since its inception, IWHC has worked with our grantee partners to document the policy’s impact and advocate for its end.

In 2019, IWHC continued our in-depth research on the impact of the Global Gag Rule with partners in Kenya, Nepal, Nigeria, and South Africa. They conducted 118 interviews with government officials, health care providers, and civil society groups. The resulting report, Crisis in Care, was featured in more than 100 media outlets, including Reuters, the Guardian, Foreign Policy, Al Jazeera, and Vice.

In Washington DC, IWHC mobilized against the policy. We organized congressional briefings with the report providing crucial and concrete evidence of the harm it causes. US policymakers were shocked by the Gag Rule’s widespread and heartbreaking impacts, from women dying to clinic closures. Together with likeminded advocacy organizations we built a cross-movement coalition of groups and mobilized to

WHAT’S THE GLOBAL GAG RULE?

The Global Gag Rule prohibits foreign nongovernmental organizations that receive US global health funding from providing, counseling, referring, or advocating for abortion services—even with their own funds. Under presidents Reagan, George H.W. Bush, and George W. Bush, the policy restricted family planning funds—approximately $600 million annually—and had devastating consequences. Under President Trump, the Global Gag Rule has been expanded and now applies to all global health spending, nearly $9 billion* annually—and had devastating consequences. This drastic expansion has intensified the negative impacts of this deadly policy.

“Because we couldn’t get any further US funding at that time, we closed quite a sizeable portion of our programs...about 40,000 of adolescent girls and young women then stopped receiving information on family planning.”

Interviewee from Kenya

Partners on the Hill

IWHC’s documentation of the Global Gag Rule is grounded in the realities of our grantee partners and their communities. As a result, we brought partners to Capitol Hill to speak directly with US decisionmakers so they can better understand how US policies affect women and girls worldwide. With researchers from the Center for Research on Environment, Health, and Population Activities (CREHPA) in Nepal and the Critical Studies in Sexualities and Reproduction program at Rhodes University in South Africa, IWHC engaged congressional staff on the evidence collected, the urgency of combatting the Global Gag Rule, and the importance of passing the Global HER Act, a bill that would once and for all end the policy.
Three Years of IWHC Research

TOTAL INTERVIEWS
274

2019 INTERVIEWS
118

Consequences

- Increases unsafe abortion
- Closes clinics
- Leads to preventable deaths
- Outsized impact on vulnerable populations
- Reduces access to HIV/AIDS testing and care
- Decreases access to contraception
- Emboldens anti-rights groups
- Silences civil society

Global Gag Rule
Uniting for Universal Health Coverage

When governments committed to achieve universal health coverage (UHC) by 2030, IWHC was there, demanding the inclusion of sexual and reproductive health and rights.
Health care is a human right, yet at least half the world’s population cannot obtain health services due to financial constraints or lack of access to services. In 2019, governments at the United Nations decided to negotiate an agreement to change this horrifying statistic. IWHC seized the opportunity and co-convened the Alliance on Gender Equality and UHC to ensure universal health coverage addressed women’s needs.

When Member States finally reached a UHC agreement that prioritized sexual and reproductive health and rights on September 23, it was due to the relentless advocacy of IWHC and the Alliance.

Comprised of more than 100 organizations from over 40 countries, the Alliance overcame political gridlock and successfully persuaded policymakers that if UHC was to be effective, it must include strong commitments to gender equality and, specifically, sexual and reproductive health and rights.

To reach this outcome, the Alliance advocated with governments and civil society at the national, regional, and global levels. In June, the Alliance held a “lobby week” where IWHC staff and more than 15 Alliance members deployed across UN missions to demand governments protect and advance gender equality within the political declaration. From the World Health Organization to the headquarters of the United Nations, wherever a conversation about UHC took place, the Alliance was there to make the case for women’s rights.

The success of the political declaration is just the beginning for the Alliance. In 2020, we will continue our work by holding governments accountable to their commitments and supporting members in national level advocacy to ensure that national health programs prioritize gender equality and sexual and reproductive health and rights.

Opposition to sexual and reproductive health and rights has increased at the UN in recent years, as governments such as the United States have alienated allies, violated established protocols, and sought to erode commitments to women’s rights. Hyper-conservative leaders—including Trump, Bolsonaro, and Modi—favor nationalistic and xenophobic policies, and frame feminism and women’s and LGBTQI rights as threats. Fortunately, progressive governments and the feminist movement have not backed down and continue to defend human rights at the United Nations, proving the momentum toward gender equality is truly unstoppable.
Securing Bodily Autonomy

Alliance for Gender Equality and Universal Health Coverage:

**NUMBER OF COUNTRIES REPRESENTED:**

47

**MEMBER ORGANIZATIONS**

112

**CO-CONVENERS:**
IWHC’s grantee partners and Advocacy in Practice (AIP) participants were crucial to our successful advocacy on universal health coverage. Whether by sharing lessons from a national pilot project that sought to provide UHC to remote regions of Kenya or lobbying representatives of their government at the United Nations, each Alliance member was able to influence the UN negotiations by detailing their own experiences.

In order to bring the expertise of national implementers to global negotiations, we mobilized a group of young feminist activists for IWHC’s AIP 2.0, a deeper, more intensive training that built upon the lessons of AIP and prepared participants to influence UHC negotiations. We convened this group twice to strategize, with a view to ensuring that UN Member States had the talking points, the specific text amendments, and the evidence they needed on including a gender perspective into UHC policies—for example, with respect to the overwhelmingly female health workforce—and integrating sexual and reproductive health services in essential benefits packages.

During the lobby week in June, the AIP 2.0 participants met with stakeholders and nearly a dozen UN Member States to share their perspectives on how current health systems fail women and girls. AIPers met with both their own national delegations and with those Member States supportive of gender equality. For instance, one of
The participants met with a representative from Rwanda, her home country, as well as those from Australia, Canada, Democratic Republic of Congo, India, Mexico, New Zealand, and Nigeria, to ensure there was widespread and cross-regional support for including gender concerns and sexual and reproductive health and rights within the declaration. AIP 2.0 participants also attended the High-level Meeting at the UN General Assembly in September—the culminating event where the political declaration was officially adopted—to track country statements and begin laying the groundwork for national-level implementation of commitments, including increasing access to sexual and reproductive health services, reducing barriers to care, and supporting the development of a well-trained, fairly paid, and diverse health workforce.

Together, IWHC, AIPers, and the Alliance proved that feminist movements are unstoppable when united behind a common goal. The work will continue in 2020 and beyond: as governments move to implement UHC programs at the national level, the Alliance will be there to ensure that the full spectrum of sexual and reproductive health care services is included.
आमाले मातृ हुकाएका संतानलाई।
बाबा...को हो?
प्रश्न नगर
CURUMIM

POR TODAS AS MULHERES · POR TODOS OS DIREITOS
GRANTS TO PARTNERS

Of the more than $2.8 million in grants that we awarded this year, IWHC provided $2.5 million to the following women’s rights organizations, with the remaining $363,077 granted to individual activists.

As part of our trust-based grantmaking, we increasingly provide multi-year grants. The following list includes some grants that were initiated in previous fiscal years and includes all grants that were active in fiscal year 2019.

AFRICA

REGIONAL

African Women’s Development and Communication Network (FEMNET) $112,500
Support advocacy efforts and impact monitoring regarding the implementation of commitments of African governments to sexual and reproductive health and rights.

CAMEROON

Association pour la Promotion de l’Autonomie et des Droits de la Jeune Fille (APAD) $32,000
Empower at-risk girls and survivors of child, early, and forced marriage through sexual and reproductive health and rights information and livelihoods training in the Extreme-North region of Cameroon.

Women for a Change (Wfac) $15,000
Support feminist movement building in Cameroon and expand access to comprehensive sexuality education for adolescents in the Southwest, Center, and Littoral regions.

KENYA

Kisumu Medical and Education Trust (KMET) $100,000
Ensure universal access to sexual and reproductive health information and services for adolescent girls and young women in Kisumu, Migori, and Siaya counties in Western Kenya.

Trust for Indigenous Culture and Health (TICAH) $130,277
Implement “Our Bodies Our Choices” sexuality program and document the social and political effects of US government policies, particularly the Global Gag Rule, on sexual and reproductive health and rights in Kenya.

NIGERIA

Education as a Vaccine (EVA) $156,308
Strengthen feminist youth leadership in sexual and reproductive health and rights in Nigeria and across the continent. Document the social and political effects of US government policies, particularly the Global Gag Rule, on sexual and reproductive health and rights in Nigeria.

Generation Initiative for Women and Youth Network (GIWYN) $30,000
Reduce unsafe abortion and expand access to reproductive health information and services across Nigeria.

Left: A young woman participates in Grupo Curumim’s workshop on sexual and reproductive health and rights.
International Center for Reproductive Health and Sexual Rights (INCREASE) $55,000
Strengthen young people's, especially adolescent girls', capacity to make informed decisions about their sexual and reproductive health and rights in Minna, Niger State, Nigeria.

SOUTH AFRICA

Ibis Reproductive Health $55,000
Strengthen comprehensive sexuality education throughout South Africa's public schools.

Masimanyane Women’s Rights International $26,000
Support to expand the organization’s Young Women’s Leadership Program in Eastern Cape, South Africa.

Critical Studies in Sexualities and Reproduction, Rhodes University $22,050
Document the social and political effects of US government policies, particularly the Global Gag Rule, on sexual and reproductive health and rights in South Africa.

Sexual and Reproductive Justice Coalition (SRJC) $45,000
Advocate for the realization and fulfillment of reproductive justice and sexual and reproductive health and rights for all South Africans, and strengthen South Africa’s feminist movement.

ASIA AND THE PACIFIC

INDIA

Asia Safe Abortion Partnership (ASAP) $160,000
Improve access to safe abortion in Asia by advocating for it as a gender and rights issue, and by strengthening country-level advocacy networks.

The Coalition for Maternal-Neonatal Health and Safe Abortion (CommonHealth) $40,000
Build the capacity of coalition members to advocate for sexual and reproductive health and rights at the state and national level in India.

Creating Resources for Empowerment in Action (CREA) $125,000
Build and strengthen feminist leadership, advance human rights, and expand sexual and reproductive health information.

Sama–Resource Group for Women and Health $30,000
Strengthen and facilitate community mobilization for better access to adolescent sexual and reproductive health care, towards overall improvement of adolescent sexual and reproductive health and rights in India, particularly in Delhi.

Talking about Reproductive and Sexual Health Issues (TARSHI) $35,000
Increase knowledge of sexual and reproductive health and rights, and build perspectives of service providers and young people on sexuality in a rights-based, pleasure-affirming manner.

The YP Foundation $40,000
Strengthen youth-led advocacy on adolescent sexual and reproductive health and rights in India, especially by young women.

NEPAL

Center for Research on Environment Health and Population Activities (CREHPA) $27,368
Document the social and political effects of US government policies, particularly the Global Gag Rule, on sexual and reproductive health and rights in Nepal.

PAKISTAN

Aahung $130,000
Support for Aahung’s programming on sexual and reproductive health and rights in Pakistan.
EUROPE
REGIONAL
Central and Eastern European Women’s Network for Sexual and Reproductive Health and Rights (ASTRA) $50,000
Advocate for and defend sexual and reproductive health and rights in Central and Eastern Europe, and counter growing fundamentalism.

POLAND
Federation for Women and Family Planning $30,000
Increase capacity to advance sexual and reproductive health and rights in Poland.

UNITED KINGDOM
Commonwealth Medical Fund (Commat) $10,000
Promote sexual and reproductive health and rights through the UN’s 2030 Agenda nationally, regionally, and globally.

LATIN AMERICA
ARGENTINA
Católicas por el Derecho a Decidir – Argentina (CDD-Argentina) $124,333
Expand access to and public support for safe and legal abortion in Argentina through communications strategies, advocacy, and institutional strengthening.

BRAZIL
Católicas pelo Direito de Decidir – Brasil (CDD-Brazil) $90,000
Advance and defend sexual and reproductive health and rights in Brazil.

Centro de Estudos de Estado y Sociedad (CEDES) $117,000
Expand access to and public support for safe and legal abortion in Argentina.

Centro Feminista de Estudos e Assessoria (CFEMEA) $155,500
Strengthen the Brazilian women’s movement, and advance and defend sexual and reproductive health and rights.

Grupo Curumim $90,400
Advance and defend women’s and adolescents’ sexual and reproductive health and rights, and safe and legal abortion in Brazil.

NEW GRANTEE SPOTLIGHT:

Observadoras de la Ley de Aborto

In 2019, IWHC began a new partnership with the feminist group, Observadoras de la Ley de Aborto, Abortion Law Observers, to document the impact of so-called “conscientious objection”—the refusal to provide care based on an individual’s personal beliefs—on abortion care in Chile. Since Chile decriminalized abortion in 2017, health providers and institutions have objected to providing abortions, undermining the hard-fought rights of pregnant people and placing an undue burden on providers who fulfill their obligations. This project will expose both the scope and consequences of refusals to care in Chile, with the aim of mitigating its impact on patients and providers alike.
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<tr>
<td>Odara – Instituto da Mulher Negra</td>
<td>Brazil</td>
<td>$35,000</td>
<td>Advance black women’s activism and movements in Brazil.</td>
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<tr>
<td>Observadoras de la Ley de Aborto</td>
<td>Chile</td>
<td>$22,000</td>
<td>Document the impacts of refusals of abortion care on health providers and people seeking abortions in Chile, and defend against so-called “conscientious objection.”</td>
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<tr>
<td>Conservación, Investigación y Aprovechamiento de los Recursos Naturales A.C. (CIARENA)</td>
<td>Mexico</td>
<td>$25,000</td>
<td>Advocate for the human rights of indigenous people, particularly young people, and strengthen organizational and staff capacity.</td>
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<tr>
<td>Instituto de Educación y Salud (IES)</td>
<td>Peru</td>
<td>$30,000</td>
<td>Strengthen the capacity and commitment of teachers and educational authorities to improve the implementation of comprehensive sexuality education in Peru.</td>
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<tr>
<td>PROMSEX: Centro de Promoción y Defensa de los Derechos Sexuales y Reproductivos</td>
<td>Uruguay</td>
<td>$120,000</td>
<td>Advocate for laws and policies that advance sexual and reproductive health and rights and human rights.</td>
</tr>
<tr>
<td>Mujer y Salud en Uruguay (MYSU)</td>
<td>Uruguay</td>
<td>$117,000</td>
<td>Advocate for expanded access to safe, high quality sexual and reproductive health services, including abortion, in Uruguay and the Latin American and Caribbean region.</td>
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MIDDLE EAST AND NORTH AFRICA

LEBANON
The A Project $40,000
Support their work to challenge the dominant patriarchal, medicalized approach to gender, sexuality, mental health, and sexual and reproductive health.

TURKEY
Women for Women’s Human Rights—New Ways (WWHR) $72,500
Defend and advance women’s rights and gender equality at the national, regional, and global levels.

NORTH AMERICA

CANADA
Youth Coalition $30,000
Strengthen young people’s global advocacy for sexual and reproductive health and rights.

GLOBAL AND REGIONAL ADVOCACY

In addition to our institutional grantmaking, IWHC provides grants to feminist activists worldwide. In 2019, we provided $363,077 to support the participation of activists in global policy dialogues.

Commission on the Status of Women 63 $41,200
Support for 11 individuals from nine countries to advocate at the largest UN gathering focused on achieving gender equality and women’s human rights.

High Level Political Forum $31,442
Support for six individuals from six countries to advocate at the main United Nations platform on sustainable development, which plays a central role in the follow-up and review process toward the Sustainable Development Goals and 2030 Agenda.

Advocacy in Practice $135,400
Support for 17 individuals from 11 countries to participate in IWHC’s Advocacy in Practice program and participate in UN-based advocacy for gender equality and universal health coverage.

Global Gag Rule Documentation Project $17,467
Support for nine individuals from four countries to participate in IWHC’s Global Gag Rule Data Party, where participants collectively analyzed collected data and identified trends across countries.

Self-Managed Abortion Convening $65,691
Support for 29 individuals from 18 countries to attend and participate in IWHC’s convening on self-managed abortion, which sought to destigmatize and advance the right to self-managed abortion globally.

Universal Health Coverage Negotiations $31,356
Support for seven individuals to advocate for universal health coverage programs that prioritize gender equality and sexual and reproductive health and rights at the United Nations.

Washington, DC-based Advocacy $10,633
Support for three individuals to join IWHC staff on Capitol Hill to advocate directly with US decisionmakers for policies and funding that advance sexual and reproductive health and rights worldwide, including ending the Global Gag Rule.

11 additional individual grants for a total of $29,888 covered travel to regional and global meetings and conferences involving technical expert groups in multilateral processes, data, and youth initiatives.
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Fiscal Year 2019: October 1, 2018 to September 30, 2019

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<table>
<thead>
<tr>
<th>Amount</th>
<th>Donor(s)</th>
</tr>
</thead>
</table>
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FINANCIAL STATEMENTS

Fiscal Year 2019: October 1, 2018 to September 30, 2019

Revenue

- 65% FOUNDATIONS $5,037,967
- 34% INDIVIDUALS $2,648,630
- 1% OTHER $74,939

Expenses

- 77% PROGRAM $6,444,590
- 12% FUNDRAISING $962,800
- 11% ADMINISTRATION & MANAGEMENT $900,059
# Financial Statements: Fiscal Year 2019

## Statement of Financial Position

<table>
<thead>
<tr>
<th>Assets</th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and Cash Equivalents</td>
<td>$6,735,504</td>
<td>$6,273,746</td>
</tr>
<tr>
<td>Grants and Contributions Receivable</td>
<td>$1,596,158</td>
<td>$2,481,629</td>
</tr>
<tr>
<td>Prepaid Expenses and Other Current Assets</td>
<td>$173,632</td>
<td>$121,141</td>
</tr>
<tr>
<td><strong>Total Current Assets</strong></td>
<td><strong>$8,505,294</strong></td>
<td><strong>$8,876,516</strong></td>
</tr>
<tr>
<td>Grants and Contributions Receivable, net</td>
<td>$150,000</td>
<td>$434,996</td>
</tr>
<tr>
<td>Property and Equipment, net</td>
<td>$328,596</td>
<td>$32,485</td>
</tr>
<tr>
<td>Other Assets</td>
<td>$34,003</td>
<td>$25,353</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td><strong>$9,017,893</strong></td>
<td><strong>$9,369,350</strong></td>
</tr>
</tbody>
</table>

| Liabilities & Net Assets       |            |            |
| Current Liabilities            |            |            |
| Accounts Payable and Accrued Expenses | $435,981 | $219,765 |
| Grants Payable                | $121,000   | $306,001   |
| **Total Current Liabilities** | **$556,981** | **$525,766** |
| Deferred Rent                  | $223,356   | $68,765    |
| Other Liabilities              | $34,003    | $25,353    |
| **Total Liabilities**          | **$814,340** | **$619,884** |

## Commitments & Contingencies

| Net Assets                     |            |            |
| Unrestricted:                  |            |            |
| Board-Designated — Operating Reserve | $2,529,958 | $2,021,121 |
| Board-Designated — Director’s Reserve | $2,887,558 | $3,009,001 |
| **Total Unrestricted Net Assets** | **$5,417,516** | **$5,030,122** |
| Temporarily Restricted         | $2,786,037 | $3,719,344 |
| **Total Net Assets**           | **$8,203,553** | **$8,749,466** |
| Total Liabilities and Net Assets | **$9,017,893** | **$9,369,350** |
### Statement of Activities and Changes in Net Assets

**Support & revenue**

<table>
<thead>
<tr>
<th></th>
<th>2019 Unrestricted</th>
<th>2019 Temporarily Restricted</th>
<th>2019 Total</th>
<th>2018 Unrestricted</th>
<th>2018 Temporarily Restricted</th>
<th>2018 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions – Foundations and Others</td>
<td>$2,776,751</td>
<td>$2,261,216</td>
<td>$5,037,967</td>
<td>$2,601,816</td>
<td>$1,563,663</td>
<td>$4,165,479</td>
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<tr>
<td>Contributions – Individuals</td>
<td>1,404,777</td>
<td>–</td>
<td>1,404,777</td>
<td>940,083</td>
<td>–</td>
<td>940,083</td>
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<tr>
<td>Grants – Government Agencies</td>
<td>–</td>
<td>–</td>
<td>–</td>
<td>115,000</td>
<td>–</td>
<td>115,000</td>
</tr>
<tr>
<td>Special Events</td>
<td>1,498,891</td>
<td>–</td>
<td>1,498,891</td>
<td>1,144,107</td>
<td>–</td>
<td>1,144,107</td>
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<tr>
<td>Direct Expenses of Special Events</td>
<td>(255,038)</td>
<td>–</td>
<td>(255,038)</td>
<td>(251,343)</td>
<td>–</td>
<td>(251,343)</td>
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<tr>
<td>Investment Income</td>
<td>33,790</td>
<td>–</td>
<td>33,790</td>
<td>33,887</td>
<td>–</td>
<td>33,887</td>
</tr>
<tr>
<td>Miscellaneous Income</td>
<td>41,149</td>
<td>–</td>
<td>41,149</td>
<td>101,938</td>
<td>–</td>
<td>101,938</td>
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<tr>
<td>Net Assets Released from Restrictions</td>
<td>3,194,523</td>
<td>(3,194,523)</td>
<td>–</td>
<td>4,019,103</td>
<td>(4,019,103)</td>
<td>–</td>
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<tr>
<td><strong>Total Support and Revenue</strong></td>
<td>$8,694,843</td>
<td>(933,307)</td>
<td>$7,761,536</td>
<td>$8,704,591</td>
<td>(2,455,440)</td>
<td>$6,249,151</td>
</tr>
</tbody>
</table>

**Expenses**

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Services</td>
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<td></td>
</tr>
<tr>
<td>Advocacy and Policy</td>
<td>1,304,267</td>
<td>1,405,302</td>
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<tr>
<td>Strengthening International Partnerships</td>
<td>3,370,260</td>
<td>2,909,892</td>
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<tr>
<td>Learning, Monitoring &amp; Evaluation</td>
<td>642,501</td>
<td>756,105</td>
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<tr>
<td>Coalition Institutional Capacity</td>
<td>1,127,562</td>
<td>990,824</td>
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<tr>
<td><strong>Total Program Services Expenses</strong></td>
<td>$6,444,590</td>
<td>$6,062,123</td>
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<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institutional Development</td>
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<tr>
<td>Management, Administrative &amp; Board Liaison</td>
<td>900,059</td>
<td>782,738</td>
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<tr>
<td>Fundraising</td>
<td>962,800</td>
<td>779,447</td>
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<tr>
<td><strong>Total Institutional Development Expenses</strong></td>
<td>$1,862,859</td>
<td>$1,562,185</td>
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</tbody>
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<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Expenses</strong></td>
<td>$8,307,449</td>
<td>$7,624,308</td>
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<tr>
<td>Changes in Net Assets</td>
<td>387,394</td>
<td>(2,455,440)</td>
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<tr>
<td>Net Assets, Beginning of Year</td>
<td>5,030,122</td>
<td>6,174,784</td>
</tr>
<tr>
<td><strong>Net Assets, End of Year</strong></td>
<td>$5,417,516</td>
<td>$4,165,479</td>
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</tbody>
</table>
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