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MSI Reproductive Choices

(prior known as Marie Stopes International)

case study

Evaluation of support to gender equality
in Danish development cooperation

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List of abbreviations

DKK	Danish Kroner
GCF	Global Climate Fund
IPPF	International Planned Parenthood Federation
KII	Key Informant Interview
LNOB	Leave No One Behind
MFA	Ministry of Foreign Affairs of Denmark
MSI	Marie Stopes International
MST	Marie Stopes Tanzania
PAC	Post-Abortion Care
SDG	Sustainable Development Goal
SRH	Sexual and Reproductive Health
SRHR	Sexual and Reproductive Health and Rights
UN	United Nations
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UN Women	United Nations Entity for Gender Equality and the Empowerment of Women

Introduction

The purpose of this case study is to explore the strategic relevance and added value of Denmark’s partnership with Marie Stopes International (MSI), supported by Denmark since 2010 and within the Danish portfolio of sexual and reproductive health and rights (SRHR).

Operating in 38 countries, MSI is a leading SRHR organisation that has received funding from Denmark annually to its core budget¹.

In the context of the Evaluation of support to gender equality in Danish development cooperation (2014-2021), MSI is a relatively small recipient organisation and is considered as a *minor* case study. The same applies to the Global Climate Fund (GCF), while somewhat greater recipient organisations the United Nations Population Fund (UNFPA) and the United Nations Children’s Fund (UNICEF) are medium case studies.

The minor-size case evaluation case study of MSI summarised in this report begins with an outline of the methodology applied. Findings follow in relation to the overall Danish partnership with the fund and two project deep dives identified for closer scrutiny based on the diversity of scope and purpose, as shown in the overview in Table 1.

Table 1. Overview of MSI project deep dives

#	Activity	Theme	Modality – Budget	Status
1	MSI Ladies and centres Burkina Faso Mobile midwives bringing services to their communities	SRHR	Contribution by providing annual core funding ²	N.A.
2	Kenya ‘Outreach’ Reproductive health and family planning service delivery to communities in rural and remote areas	SRHR	Contribution by providing annual core funding ³	N.A.

Methodology

Desk study and scoping interviews in May–June 2022 informed the approach to the assessment of the overall partnership and the two project deep dives. The case study triangulates findings from interviews, focus group discussion and desk review of documentation. Desk review scope includes the Danish organisation

¹ Please note that from 2023 Denmark no longer provides core funding to MSI but flexible programme support to MSI’s activities within service delivery and advocacy.

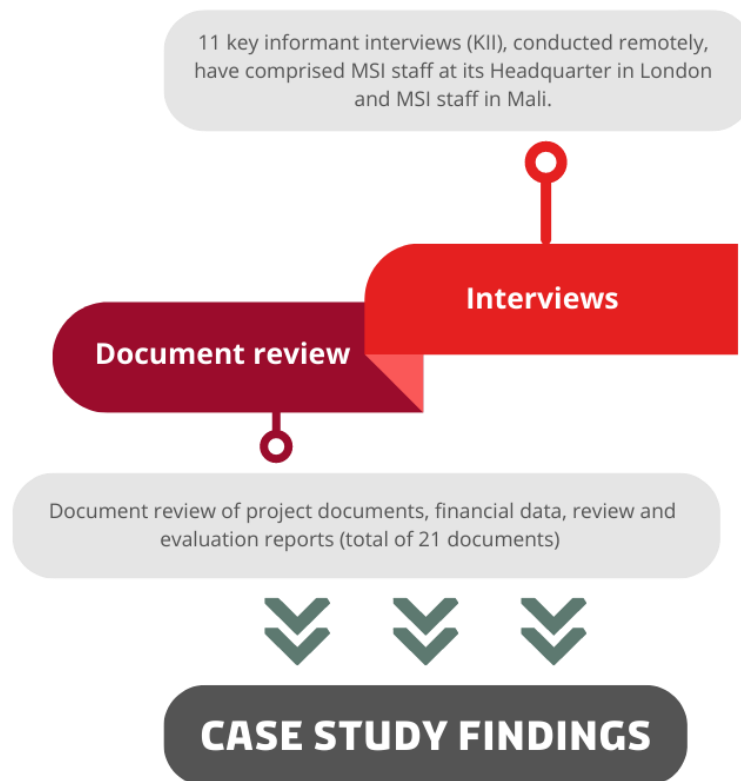
² MSI received core funding from Denmark, which MSI then allocated to MSI Burkina Faso and Kenya among other contexts.

³ Ibid.

strategy for MSI 2018-2022, financial data, progress and review reports. Project deep dives comprised evidence from MSI-commissioned reviews as well as MFA review findings.

The 20 key informant interviews (KIIs), conducted remotely, were with MSI staff at its headquarters in London and in Mali and Burkina Faso. At the only in-person meeting, the evaluation team was able to meet with MSI staff in Kenya during a country case visit in October 2022. During this visit, the team was also able to visit an MSI clinic and carry out a focus group discussion with staff and beneficiaries.

Figure 1. Case study methodology



Danish MSI partnership findings

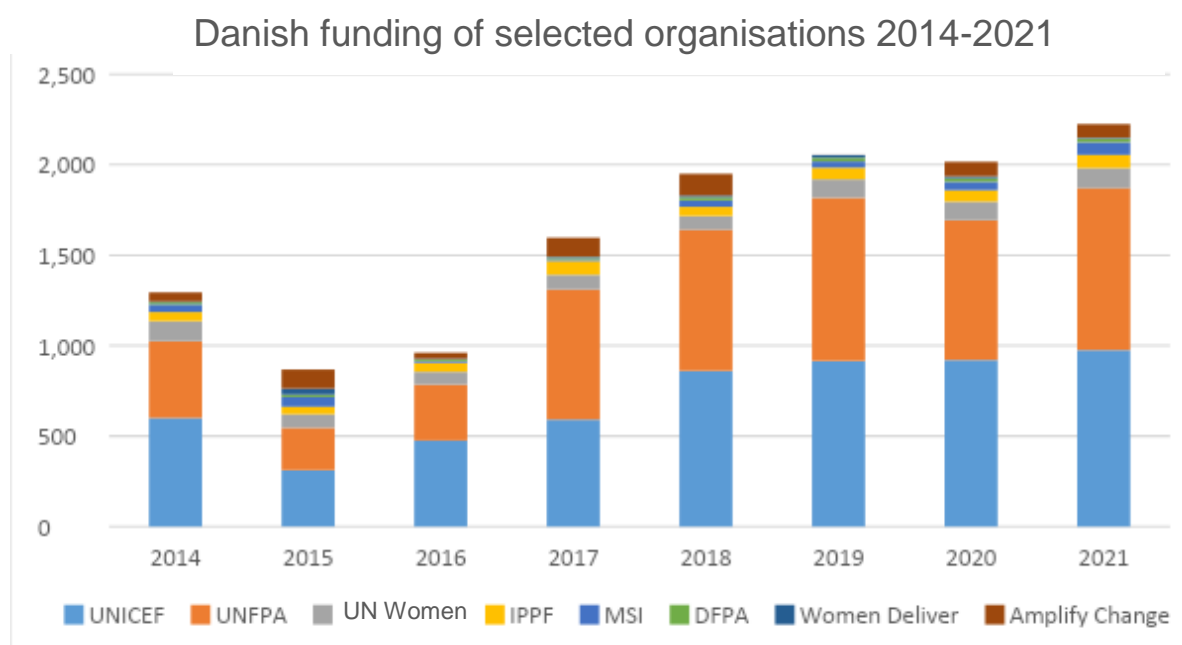
MSI is an important partner in the portfolio of SRHR organisations supported by Denmark. Findings of this evaluation point to high levels of appreciation from MSI, mainly because of Denmark’s flexibility by having provided core funding and because of its high-level joint advocacy work. Elements of the core funding arrangements were technical and policy dialogue, with a strong focus on adolescent girls’ and women’s right to reproductive choices.

Key trends of gender budgetary allocations

EQ 1: What have been the development and key trends of gender budgetary allocations in bilateral and multilateral programmes over the period 2014-2021?

Denmark provided an annual core contribution to MSI. As can be seen in Figure 2, the scope of contributions was steady and there was a modest share of funding, compared with other Danish partners also having a focus on gender equality, such as the UNFPA, UNICEF or the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women).

Figure 2. Context of Danish contributions to MSI



Denmark's annual core contribution to MSI in the reviewed period was subject to an annual parliamentary approval of the Finance Act before the grant was channelled through the MSI Investment Fund to MSI's development activities in OECD/DAC-approved countries. Under the Organisational Strategy 2018-2022, 85% of the annual core funding was allocated to MSI's Investment Fund (equivalent to the Blue Door Fund) and 15% to MSI's advocacy work. This type of funding gave MSI a high ability to track funding, which appeared to be almost akin to soft earmarking.

MSI received DKK 41.5 million core funding annually in 2014 and 2015, and DKK 25 million annual core funding from 2018 to 2022. The MFA has also provided an additional DKK 12 million in 2020 and DKK 25 million in 2021 as

part of the MFA Covid-19 support packages, and the MFA has made DKK 60 million available to Marie Stopes Tanzania (MST) in a bilateral agreement with the Danish embassy in Tanzania.

Key drivers of Danish support priorities

EQ 2: What have been the main drivers behind these priorities? What are the main factors behind the shifts in funding to these organisations?

The main driver behind these budgetary allocations was the Danish strategic priority of SRHR, echoed in the Organisational Strategy 2018-2022 (the first strategy since Denmark started providing support to MSI in 2018) within its two priority areas:

1. Scale and Impact: Doubling the health impact through contraception and safe abortions service delivery at scale.
2. Sustainability: Using MSI's expertise as a social business to build sustainable private sector models that go beyond donor support.

The overall objective for Denmark's engagement with MSI, a leading SRHR organisation, was to promote women's and girls' SRHR, which is the core of MSI's mandate, both as a frontline organisation delivering SRHR services, including provision of contraception and safe abortion, and as a national and global advocate for women and girls' rights.

Denmark's vision in the reviewed period was a world where everyone can take charge of her or his own life; this was reflected in Denmark's strategy for development cooperation and humanitarian action, the World2030 (in place from 2017-2021), the development strategy at the time the organisational strategy was developed. The World2030 was informed by four strategic aims: (1) Security and development – peace, stability and protection; (2) Migration and development; (3) Inclusive, sustainable growth and development; (4) Freedom and development – democracy, human rights, and gender equality.

The World2030 also reflected the commitment to the United Nations' (UN's) Sustainable Development Goals (SDGs) and recognised the interdependency between the goals. It placed gender equality and SRHR of women and girls at the centre of development and key to sustainable growth and prosperity and acknowledges that it is cross-cutting and must be mainstreamed in order to achieve the SDGs. MSI's growing focus on protecting and promoting SRHR in fragile and humanitarian settings aligned well with Danish priorities, i.e. MSI's core mandate and activities were in full convergence with the Danish priorities, especially strategic aim 4, and contributed directly to Denmark achieving its objectives.

The partnership with MSI adds to the number of organisations that Denmark supports in the promotion of women's and girls' SRHR, such as the UNFPA, the

International Planned Parenthood Federation (IPPF), the multi-donor SRHR fund AmplifyChange and the Danish Family Planning Association (Sex & Samfund).

Outcome of global dialogue

EQ 4: What has been the outcome and effectiveness of Danish engagement in global dialogue on support to gender equality?

- *On what issues does Denmark regularly engage in global dialogue on gender equality with case study partners?*
- *How (through what mechanisms/fora) does Denmark engage in this dialogue?*

MSI and Denmark became mutually appreciated partners, especially in advocacy, which MSI staff remembers as being “transformational for the organisation”. A grant provided by Denmark in 2014 enabled MSI to scale up, which led to a higher recognition of the role that MSI plays in the ecosystem and the work on removing restrictions, and which resulted in becoming a priority in MSI’s strategy ‘MSI 2030: Your Body, Your Choice, Your Future’. This coherent pathway of change and MSI’s ambition to engage in advocacy and to leave no one behind (LNOB), with a focus on reaching adolescent girls and vulnerable and marginalised women in partnership with other organisations, was also acknowledged as evident in the MFA’s midterm review of MSI reproductive choices in 2021.⁴ This midterm review suggested that the ongoing strategic dialogue between the MFA and MSI could be further developed and utilised with a focus on topics of mutual strategic interest.

In 2019 MSI was able, with Denmark’s support, to secure 13 policy changes, including:

- **Kenya:** new PAC (post-abortion care) guidelines secured; increased resource allocation for family planning secured in Mombasa County and Nakuru County;
- **Niger:** Presidential Decree secured to implement Reproductive Health Law, ensuring this is now binding law, and to enhance community-based distribution of FP services;
- **Nigeria:** inclusion of misoprostol and mifepristone on the Essential Drug List in Nigeria; and
- **Mongolia:** revised National Safe Abortion Care Guidelines approved (eligible private providers can now provide MA up to nine weeks).

⁴ Ministry of Foreign Affairs of Denmark, (2021), Mid-Term Review of MSI Reproductive Choices, Copenhagen.

Case project findings

Assessment of the two selected deep dive MSI projects also involved a global perspective on both projects, as both are part of MSI's sexual and reproductive health (SRH) service delivery through the interlinked channel 'Outreach SRH services to hard-to-reach areas and support through MSI Ladies'.

EQ 4: What has been the outcome and effectiveness of Danish engagement in global dialogue on support to gender equality?

EQ 5: What kind of interventions, approaches or strategies in multilateral programmes have been well suited to supporting transformational gender changes and what lessons can be drawn?

EQ 6B: What is the added value of partnerships with multilateral and international organisations with regard to advancing gender equality?

MSI Ladies and centres in Burkina Faso

The MSI Ladies Channel started as a pilot project in just a few countries in 2009 but has since grown into a network of over 1,000 community-based providers. This group consists of locally based midwives and nurses who are trained and supported by MSI to offer contraceptive services and advice to women in their homes. In 2020, over 650,000 clients were seen by MSI Ladies across the MSI programmes.

The SRH project focuses on advocacy and influencing the legal framework to improve access to SRH services. The services developed through MSI Ladies (mobile midwives bringing services to their communities) show an integration of the gender approach to offer freedom of choice to the populations, far from the prejudices and stereotypes that limit the use of contraceptive products. This project is also gender-targeted in terms of its ability to coordinate stakeholders in the delivery chain to facilitate the right of access for women and men.

The project's advocacy and law enforcement activities allow it to respond to people exposed to prohibitions and restrictions that are unfavourable to women's SRH (remoteness, scarcity of contraceptive products, limitations imposed by husbands, high cost, etc.). Through its advocacy actions, MSI has encouraged the establishment of regional selected committees in six regions in Burkina Faso who, to mark their adherence to actions promoting SRH rights, commit to carrying out activities in their regions. Commitment is made through a charter signed by those concerned, which led to unexpected results, influencing the mobilisation of local actors.

In its Annual Report 2020,⁵ MSI states that the poorest fifth of women in the sub-Saharan Africa region are twice as likely to have an unmet need for contraception as the richest fifth. For young women aged 15–19, access to contraception is often more limited. The total fertility rate in Burkina Faso, 6.0 children per woman on average, is largely explained by the low contraceptive prevalence rate (16.8% long-term or permanent, 31.9% modern methods, 21.3% represent unmet needs), concerning mainly rural areas, outskirts of urban centres and, increasingly, areas under the influence of the security crisis. The MSI project has helped maintain and expand the supply of SRH services.

Kenya ‘Outreach’

With its mobile outreach channel, MSI delivers clinical health services by a mobile team of trained providers through periodic visits to a particular site or from a mobile unit, offering considerable potential to deliver high-quality reproductive health and family planning services to communities that are unable to access them elsewhere.

Encouraged by one of Denmark’s priorities, LNOB – the central, transformative promise of the 2030 Agenda for Sustainable Development – MSI started focusing more on marginalised women and girls, but missed clearer guidance from Denmark at the beginning of implementation. This may be compared with e.g., Canada and its feminist approach, which comes with clear requirements MSI is requested to meet and which enabled MSI to learn and improve faster. However, to ensure they reach the most marginalised and underserved, MSI continuously tailors the approach to best meet their needs.

With Denmark’s extra contribution to MSI’s Covid-19 response and with Denmark’s funding flexibility (MSI’s core budget goes through the Blue Door Fund),⁶ MSI was able to adapt quickly, finding ways to ensure its services were classified as essential so that sites and outreach teams could continue to operate safely. Considering the impact of Covid-19 in the region, the Kenya MSI programme was one of the highest-performing, with 10% growth in 2019, driven by strong outreach performance.⁷

⁵ MSI, Reproductive Choices (2020) 2020 Annual Report and Financial Statements, London.

⁶ The Blue Door Fund was established to enable MSI to amplify its services by making best use of unrestricted and lightly restricted funding. It is an internal mechanism that allocates support to MSI offices according to their needs and requests.

⁷ MSI, Reproductive Choices (2020) 2020 Annual Report and Financial Statements, London.

Conclusions

By providing annual core funding, Denmark became a highly valued and strategic donor to MSI and a leading organisation in SRHR, and further enabled MSI to achieve greater recognition among other players and their work on removing restrictions. Driven by Denmark's support, MSI's ambition to engage in advocacy and LNOB resulted in becoming a priority in MSI's strategy 'MSI 2030: Your Body, Your Choice, Your Future'.

To ensure MSI reaches the most marginalised and underserved, MSI does continuously tailor the approach to best meet their needs but did miss guidance from Denmark at the beginning of implementation. The evaluation finds that support to MSI is highly relevant as a much-needed contribution to the hard-to-fund SRHR priority area of safe abortion.

With Denmark's extra contribution to MSI's Covid-19 response, and with Denmark's funding flexibility (MSI's core budget goes through the Blue Door Fund), MSI was able to adapt quickly, finding ways to ensure its services were classified as essential so that sites and outreach teams could continue to operate safely.

Recommendations

EQ 12: What strategic and practical considerations might Denmark engage in in association with MSI to gain a leading role in supporting gender equality and women's and girls' rights?

What institutional barriers might Denmark address in association with MSI to gain a leading role in supporting gender equality and women's and girls' rights?

Two potential recommendations emerge from the case study of MSI:

#1 Maintain ongoing strategic dialogue with MSI for it to be further developed and utilised with a focus on topics of mutual strategic interest.

#2 Provide clear guidance to partners when introducing new priority areas to programme documents.

Annex A: People consulted

	Name	Sex	Designation	Organisation	Location
1	Julia Byington	F	Senior Manager, GESI	MSI HQ	United Kingdom
2	Selena Nair	F	Head of Government partnerships	MSI HQ	United Kingdom
3	Rachel Cullen	F	Director of Government and Multilateral Programmes	MSI HQ	United Kingdom
4	Salima Mohammed	F	GESI advisor	MSK	Kenya
5	Festus Kisamwa	M	External Relations Advisor	MSK	Kenya
6	Job Makoyo	M	Director for Programmes and Operations	MSK	Kenya
7	Dr Sharon Moheni	F	County Director	Machakos Level 5 Hospital	Kenya
8	Sarah Shaw	F	Head of Advocacy	MSI HQ	United Kingdom
9	Bethan Cobley	F	Director, Resilience, Advocacy and Partnerships	MSI HQ	United Kingdom
10	Martin Migombano	M	Country Director	MSI Mali	Mali
11	Boubacar Sawadogo	M	MSI Deputy Resident Representative	MSI Burkina Faso	Burkina Faso
12	Tiguida Sissoko	M	Burkina Country representative	MSI Burkina Faso	Burkina Faso
13	Fatou Jansen	F	MSI Regional advocacy advisor	MSI Burkina Faso	Burkina Faso
14	Hamadou Ouedraogo	M	Program Director	MSI Burkina Faso	Burkina Faso
15	Tana Bagnao	F	Coordinator responsible for MS Ladies and MS Men	MSI Burkina Faso	Burkina Faso
16	Helene Tiendrebeogo	F	Advocacy officer	MSI Burkina Faso	Burkina Faso
17	Yasmina Somlare	F	Marketing and communication manager	MSI Burkina Faso	Burkina Faso
18	Tidiane Ouedraogo	M	Director of operations	MSI Burkina Faso	Burkina Faso
19	Florence Douamba	F	Beneficiary	MSI Burkina Faso	Burkina Faso
20	Arzata Sow	F	Beneficiary	MSI Burkina Faso	Burkina Faso

Annex B: Literature list

- Ministry of Foreign Affairs of Denmark: Danish organisation strategy for MSI 2018-2022.
- Ministry of Foreign Affairs of Denmark (2021) Mid-Term Review of MSI Reproductive Choices.
- Marie Stopes International (2020) Annual Report and Financial Statements.
- Marie Stopes International Burkina Faso (2021) Annual Report and Financial Statements 2020.
- Marie Stopes International (2020) Children by choice, not chance MSI & DANIDA 2019 Annual Review.
- Marie Stopes International (2016) Model of commitment by authorities in the Boucle du Mouhoun region to support strategies for youth access to health and reproductive services.
- Marie Stopes International (2022) MSI Burkina Faso November Advocacy Results.
- Marie Stopes International (2020) Plan for the nationwide transition of the delegation of tasks in the field of family planning.
- Marie Stopes International (2021) Rapport atelier de formation des acteurs judiciaires sur la clarification des valeurs et la transformation des attitudes en matière de santé sexuelle et reproductive, Koudougou, 15-19 Novembre 2021.
- Marie Stopes International (2022) Report of the National Consensus Meeting on the Case for Improving Access to Quality STIs, Revision and Harmonization of Legal Texts on SRHR in Burkina Faso.