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Management Response and Follow-up Note Evaluation of the Danish Strategy for the Promotion of Sexual and Reproductive Health and Rights 2006-2013

This note contains conclusions and recommendations from the final Synthesis Report of "The Evaluation of the Strategy for the Promotion of Sexual and Reproductive Health and Rights – Pathways to Change in SRHR". It also includes Danida's management response and follow-up actions to the evaluation. The management response is inserted in italics after the conclusions and recommendations.

The Strategy that is subject to the present evaluation was launched in 2006 and grounded in the Programme of Action of the International Conference on Population and Development (ICPD) with four themes: 1) Promoting Gender Equality and Empowering Women; 2) Improving Sexual and Reproductive Health; 3) Improving Young People's Access to Information and Services; and 4) Linking HIV/AIDS to SHSR.

The evaluation was commissioned and managed by the Evaluation Department of the Ministry of Foreign Affairs. It was conducted by an independent evaluation team of international consultants from Europe Health Group, DK and the Royal Tropical Institute of the Netherlands as of December 2013 to August 2014.

The evaluation had a two-fold objective: 1) to document results of what had been achieved in terms of promotion of SRHR at international level and country level focusing on the two case studies of Ghana and Mozambique; and 2) to inform future support for SRHR in light of the decision to place Denmark in the forefront of international advocacy for progress on SRHR.

Conclusions of the evaluation

In concert with its partners' efforts, Denmark's support has made a significant and credible contribution to results in SRHR at both international and country levels. It has achieved this result through e pragmatic and complementary use of a variety of Contribution Pathways at both international and country level.

Results on the Relevant Millennium Development Goals

As to the achievements on reaching the relevant Millennium Development Goals Denmark has contributed substantially.

On MDG Three: Promote Gender Equality and Empower Women. The Evaluation focused on areas most directly linked to the Strategy, especially access to effective family planning services, access to safe abortion, and an improved legal framework for the sexual and reproductive rights of women and sexual minorities. In Ghana, the Evaluation found that the government and its INGO partners were engaged in an important effort to improve access to

safe abortion but more effort was required to improve uptake of family planning. In Mozambique, there is an ongoing effort, led by local CSOs, to strengthen the legal framework and protect the sexual and reproductive rights of women and of sexual minorities.

On MDG Five: Improve Maternal Health. The Evaluation found that both Ghana and Mozambique had made significant progress in reducing Maternal Mortality Ratios (MMR) during the evaluation period but not at a pace which will allow them to meet their goals for 2015. In Ghana, the most significant contributor was improved access to safe, legal abortion services. Both countries also improved levels of skilled birth attendance and Ghana reported some progress in improving contraceptive prevalence rates, an area where Mozambique was not able to report progress. Tete Province in Mozambique, with Danish support, has been able to report more positive results than the country as a whole, especially in family planning.

On MDG Six: Combat HIV and AIDS, Malaria and other Diseases. Ghana has achieved positive results in combating HIV and AIDS through a targeted approach, reducing the estimated HIV prevalence rate among adults from 1.9% in 2006 to 1.4% in 2012, and has steadily reduced the number of new infections and AIDS related deaths. Mozambique has not had similar success with HIV prevalence remaining above 11% from 2006 to 2013 and with just 40% of those requiring anti-retroviral therapy receiving it by 2013.

Results at international level: Denmark's contribution to the international agenda for SRHR

At international level the key result associated with Denmark's efforts has been the maintenance of the full meaning of the ICPD Programme of Action of the International Conference on Population and Development that sets out the global normative framework for SRHR. Denmark has made a consistent effort to ensure that language on sexual rights is included in international agreements on SRHR in the face of considerable resistance.

- 1. Denmark has been, and continues to be, effectively engaged in the ongoing process of advancing the international agenda on SRHR by engaging with like-minded countries, multilateral organisations, and international and Danish NGOs in consultations and negotiations in international bodies important to the agenda. In doing so it has made effective use of all four International Pathways:
- a. Engaging in negotiations in international treaty bodies;
- b. Engagement with the EU;
- c. Engaging multilateral agencies in rights-based advocacy; and
- d. Engaging international and Danish NGOs in rights-based advocacy.

By advancing the concept of the right to sexual and reproductive health in all its dimensions Denmark's international work contributes to results under all four themes of the Strategy.

2. The Evaluation has documented Denmark's leadership in forming coalitions to effectively negotiate in international bodies to protect the full meaning of the ICPD POA and entrench language on sexual and reproductive rights. Denmark retains a position of leadership in this area.

- 3. Denmark has made effective and complementary use of a network of international and Danish NGOs to advance the global normative agenda for SRHR.
- 4. Denmark has effectively supported UNFPA as the most important United Nations organisation with a mandate for SRHR through a combination of core and earmarked funding and collaboration in negotiations. UNFPA has been an effective ally to Denmark in the conduct of international negotiations relevant to SRHR.
- 5. The Ministry of Foreign Affairs (in Copenhagen and at the Permanent Missions to the UN and to the EU) has relied on an effective and committed team of advocates for SRHR including the Permanent Representatives. As a result of previous reductions in staff specialized and experienced in SRHR, there is concern within Danida and among partners in Denmark and abroad whether Danida can continue to be an effective and engaged partner on policy development and advocacy rather than just a funding agency.
- 6. Danida support to Danish and international NGOs and research organizations, including research networks, has been a positive factor in promoting research on long lasting, women controlled contraceptive methods, on safe abortion methods and services and on operational methods for more effective service delivery at country level. It has also contributed to synthesizing research results for use by policy makers. However, the Evaluation did not find evidence of an overall, cohesive strategy for Denmark's support to research.

Results on linking efforts at International and Country Level

- 7. The results of international negotiations on the normative framework for SRHR have an important influence on developing country plans, programmes and policies related to SRHR. The international normative framework is more than a symbolic factor in decision making.
- 8. There has not been an effective, systematic translation of Denmark's position as one of the leading advocates for SRHR internationally to a similar position at developing country level. Danida recognises the need to develop instruments and methods to better communicate the priority it places on support to SRHR at country level, especially in relation to effective engagement by the Embassies in political and social advocacy for sexual and reproductive rights.

Results at country level

- 9. At country level, Denmark has used a mix of Pathways to contribute to SRHR and in doing so has contributed to results under all four themes of the Strategy. Its bilateral support has combined funding, technical assistance, advocacy and policy dialogue. The six Pathways are:
- a. Support to health systems centrally and at provincial or regional level;
- b. Support to HIV and AIDS programming;
- c. Core support to UNFPA;
- d. Support to national programmes for young peoples' SRHR;
- e. Core support to INGOs engaged in SRHR; and

- f. Bilateral programme support to national CSOs.
- 10. Some Pathways are more effective in supporting different themes. For example, Pathway a) support to health systems makes its strongest contribution to theme three, improving sexual and reproductive health (most effectively centrally in Ghana and in Tete Province in Mozambique). Pathway e) support to INGOs contributes to all four themes but makes its strongest contributions to theme one, gender equality and women's empowerment and to theme three, improving sexual and reproductive health.
- 11. When a Contribution Pathway fails to make an expected contribution to results (in SRHR and other programme areas), Danida has shown its readiness to take action and shift resources to other programme areas or to seek other partners.
- 12. Four of the six Programme Area Pathways (a, b, d and f) supporting SRHR at country level are dependent on the use of the bilateral funding channel, specifically in the health sector. Past experience shows clearly that if Danida is not able to engage in bilateral programming for health it will lose an effective platform and source of political capital for engaging in policy dialogue and advocacy on SRHR.
- 13. Core funding of INGOs active in advocacy and service delivery for SRHR has been shown to be an effective means of supporting SRHR at country level. This applies particularly to countries like Ghana where a number of INGOs have significant SRHR programmes.
- 14. At country level, UNFPA is not able to undertake the same level and intensity of advocacy for controversial elements of the Strategy (especially for safe abortion care) as at international level or to be as effective as a committed bilateral development partner like Danida.

Results on Applying the Rights-Based Approach in Danida Support to SRHR

- 15. The clear intent of much of Denmark's engagement in international consultations and negotiations is to advance or to defend language on sexual and reproductive rights. This is consistent with a rights-based approach to implementing the Strategy at international level.
- 16. Danida's support to SRHR at country level reflects the application of the principles of a rights-based approach (normative content, non-discrimination and equity, participation, transparency and accountability). The Pathways which most clearly reflect a rights-based approach are e) support to INGOs and f) support to national CSOs.

Efficiency and the Complementary Use of Mechanisms and Support Channels

17. At international and country level, the Evaluation found that the coherent use of a mix of sector budget support, earmarked funding, long and short-term technical assistance, policy dialogue and advocacy has been effective in contributing to results in SRHR.

- 18. At international and country level, bilateral programming, core funding of multilateral organisations and funding of INGOs and CSOs have all demonstrated their fitness in different roles in support of SRHR.

 Sustainability
- 19. The key issue for the sustainability of services in SRHR at country level concerns securing adequate levels of financing, especially for family planning, safe abortion and SRH services for marginalized groups. Danida has supported efforts to address this challenge in some countries, but there is scope for greater engagement.
- 20. The Geração Biz Programme in Mozambique provides an important lesson regarding sustainability. Its effectiveness as a progressive programme to provide integrated, youth- friendly services in SRHR to young people and adolescents was undermined by an administrative and technical support structure which was multi-layered and not financially sustainable if it was to be assumed by the Government of Mozambique.
- 21. At country level, Denmark's advocacy and policy engagement (by the Royal Danish Embassy and Danish technical advisers in concert with other development partners) to sustain the profile of SRHR as a development, and not just a technical, priority has been an effective strategy. Where this engagement is lacking, SRHR may decline in priority with consequences not only for SRHR outcomes in health, but also for sustainable, equitable development.

Denmark's general comments to the evaluation:

Danida welcomes the evaluation with its overall conclusion that Denmark's support to SRHR has made a significant and credible contribution to results in SRHR at both international and country level. The evaluation documents Denmark's leadership in forming coalitions to protect and promote SRHR in international negotiations. It further highlights Denmark's ability to make use of a strong network of Danish and international NGOs, UN agencies and bilateral partners. The evaluation emphasises the pragmatic and flexible approach, applying a complementary mix of modalities and pathways towards achieving the overall goal and four thematic areas of the Strategy for the Promotion of Sexual and Reproductive Health and Rights. The evaluation provides useful insights and recommendations for the shaping of Denmark's continued strong engagement on SRHR. While commending achievements at international as well as country level, the evaluation points to a lack of effective and systematic translation of Denmark's position as one of the leading advocates for SRHR internationally to a similar position at country level. Danida acknowledges that windows of opportunity exist for a stronger engagement at country level, but this needs to be balanced against available resources and capacities.

Specific recommendations and follow-up actions and Danida's comments to these recommendations:

The Evaluation has identified a number of opportunities for Denmark to continue to strengthen its support and contribute to results in SRHR:

1. At international level it is important that the Ministry of Foreign Affairs retains at least the current level of technical capacity and experience in SRHR at the Department for Development Policy and Global Cooperation, at the Technical Advisory Service and at Permanent Missions to the UN and EU, if it is to remain effective in its efforts to strengthen

the international normative framework for SRHR. This is essential for effective engagement in partnerships with multilateral agencies and international and Danish NGOs and to avoid becoming "merely" a funding agency.

Danida acknowledges the importance of continuing to effectively participate and contribute at the technical level and aims to maintain current capacities.

2. The recently developed joint Denmark/Netherlands Advocacy Fund, with a strong focus on capacity development for CSOs in developing countries to effectively engage in advocacy for SRHR, represents a needed and potentially effective mechanism for countering increasing resistance to the rights focus of the Strategy. However, it is important that the structure of the Fund (with an external management team making allocation decisions based on applications received from CSOs) should strengthen rather than weaken the relationship between the MFA and its key partners among international and Danish NGOs and the relationship between the Embassies and their CSO partners at country level.

The civil society SRHR advocacy fund - commonly called the SRHR Fund — is a new construction which will enable Denmark to more comprehensively support civil society efforts on SRHR in the South. Till now, direct support to local civil society has in many countries been limited to a few grants under the local grant authority or through local basket funds. The new fund makes it possible to reach civil society beyond countries where Denmark has a bilateral engagement including in fragile settings etc. The Fund will support both local and international civil society through core and project support.

The intention of the Fund is neither to strengthen nor weaken the relationship to Danida's partners internationally or at country level. Rather the intention is to strengthen the civil society voice for SRHR in the South through a mechanism that enables Danida to also support local organisations, not normally able to access international funding. Danida intends to maintain close dialogue and partnership with a selected number of strategic partners among the INGOs at international and country level, national CSO partners as well as the Danish NGOs.

3. Consideration of core-support to INGOs remains important as a key pathway to achieving SRHR outcomes, particularly in bilateral settings where direct support for SRHR is lacking.

Danida plans to continue core support to a few INGOs considered of key strategic importance to Denmark and whose mandates and line of work do not fall within the scope of the SRHR advocacy. Furthermore, the SRHR Fund will provide core support, also for INGOs as one of the modalities of support.

4. There is a need for the Department for Development Policy and Global Cooperation to develop and make available to its partners a more explicit overall strategy for support to research activities and organizations in SRHR. This is needed to guide support to international and Danish NGOs and research organizations (and networks).

Support to research in the area of SRHR has been and is quite limited. Where provided (such as core support to Population Council or IPM) it is strategically linked to the Strategy for Sexual and Reproductive Health and Rights and the HIV/AIDS Strategy. Development of a specific strategy for research on SRHR is therefore not considered necessary at this stage.

5. It is essential that Denmark recognizes that decisions taken at an overall development policy level can reduce its ability to support SRHR as envisioned in the Strategy. If Danida is not engaged in social sector programming, particularly in the health sector, in countries where there is still the need to make much more rapid progress in key areas such as family planning, its ability to effectively support SRHR will be constrained. In the first instance it will lose its ability to be a key voice in technical and policy discussions relating to the sector, including government donor coordinating mechanisms. In the second, it cannot expect multilateral organizations to fully compensate for the absence of Danida in these discussions.

When decisions are taken to withdraw from any sector in a given country, it follows that Denmark loses influence as it will no longer be able to dedicate staff time and efforts towards policy dialogue in that sector. This however does not invariably imply a complete withdrawal from SRHR policy engagement by Denmark in that country — Embassy staff and management would maintain a role in bringing up this core strategic area for Denmark in appropriate forums. The new Strategic Framework for Gender Equality, Rights and Diversity may together with other policies support such strategic policy dialogue albeit at a more general level.

However, it is important to note that promoting and advancing SRHR cannot and should not be the responsibility of or dependent on any individual international donor. Therefore, Denmark works through a variety of modalities including continued bilateral support to the health sector in a number of countries, support to IPPF and other INGOs and local civil society through the new SRHR advocacy fund coupled with support to the UN system etc. to strengthen the national demand for SRHR. With a strong(er) local civil society, the efforts of the UN system, INGOs and like-minded bilateral partners remaining in the sector the push for SRHR is expected to continue.

6. At country level, the Evaluation has shown that Danida can make effective use of a mix of different contribution Pathways involving different funding channels (bilateral, multilateral and NGO) and intervention types (core financing to multilateral agencies and NGOS, sector budget support, earmarked funding, long and short term technical assistance, advocacy and policy dialogue) to provide support to all four themes of the Strategy. It is important that Embassies continue to have access to an appropriate mix of different funding channels and intervention types to contribute to the themes of the Strategy.

Danida will continue to operate a variety of modalities of support to advance SRHR.

7. There are opportunities at country level to improve coherence in SRHR support by ensuring that senior management in the Embassies, up to and including ambassadorial level, become more actively engaged in advocacy for SRHR, including in political forums. This can be facilitated by drawing on the experience of already engaged Embassies, as in Ghana. It provides a means to effectively translate Denmark's position as a leading international advocate for SRHR to developing country level and is even more important in countries where Danida is not engaged in bilateral support to social sectors.

Embassies senior management is already actively engaged in driving the SRHR agenda vis-à-vis national governments, particularly leading up to the annual international negotiations (CSW, CPD, Post-2015 process etc.) as part of the coalition building and shaping of negotiation positions. Acting on instructions from MFA, demarches are delivered to the authorities, advocating the Danish position, seeking out commonalities and areas of agreement and requesting support for these positions during international negotiations.

The continuous, on-going engagement on this agenda by Embassies including senior management, in countries without a bilateral Danish engagement on health/SRHR could perhaps be strengthened. Danida will assess needs and strengthen capacities as required as well as help Embassies identify windows of opportunity for engagement on this agenda, including development of key messages, use of the annual Ambassador's meeting and regular video conferences.

8. At country level there are also opportunities to increase the coherence of Danida support to SRHR by explicitly linking programmes outside the health sector, most obviously in good governance and human rights (especially the gender equality elements of human rights programmes) to activities in support of SRHR. There are also opportunities to pursue results in SRHR through links to Danida supported programmes in other sectors.

Danida agrees that many such opportunities exist and should be actively pursued in the country programming, if necessary with the advice of Copenhagen. The Human Rights Based Approach to Danish development cooperation provides many entry points for initiating a dialogue with partners on the rights of women including their sexual and reproductive health and rights and the HRBA Guidance Note and e-learning course provides examples of how these elements may be included in the policy dialogue and programming.

- 9. As Denmark, at least in some countries, moves away from bilateral development assistance into more political and commercial relationships in the future, it will be important to find new ways to sustain its contribution to results in SRHR. Some avenues for supporting SRHR which are under exploration in country programmes, and merit further attention include:
- a. Promoting linkages in health (among private sector firms and through INGO social franchising) to engage in knowledge transfer in, for example, new methods of contraception or medical abortion;
- b. Promoting the use of social impact bonds and other forms of support as a form of corporate social responsibility to securing financing for small scale initiatives in SRHR;
- c. Linking Danish centres of excellence in SRHR (for example, the appropriate units of Denmark's Ministry of Health and selected university faculties) to their counterparts at country level in an effort to expand learning for both; and
- d. Promoting the use of technical innovations such as mobile phone technology and mobile phone banking and payment systems to accelerate the use of family planning by making distribution and sale of contraceptives more efficient.

Danida agrees that moving towards a commercial relationship with former development partner countries provides interesting opportunities to promote SRHR and supports the merit in using a variety of entry points and "thinking out of the box" options for engaging on the SRHR agenda. The Strategic Framework on Gender Equality, Rights and Diversity identifies some of these opportunities including how Denmark together with private sector partners may support efforts to overcome some of the specific constraints to women's access to the labour market. Furthermore Denmark is allocating part of its core contribution to an Innovation Fund in UNFPA which may also serve to strengthen the linkages between SRHR and interventions such as the abovementioned.

10. There is an opportunity to strengthen the monitoring of results in SRHR at international and country levels. At international level it would be useful for the Department for Development Policy and Global Cooperation (in concert with Permanent Representations to the UN and the EU) to prepare an annual report on results achieved in negotiations in

support of the global normative framework on SRHR. A similar report on the results of investments in research would also be useful. At country level, Embassies supporting bilateral programmes for health can work to ensure that joint monitoring and review mechanisms for the health sector track essential indicators of results in SRHR.

Denmark does report and contribute to reports on SRHR in a number of ways. All ODA-financed engagements are reported in accordance with OECD-DAC-standards on a yearly basis and in accordance with standards used by IATI (International Aid Transparency Initiative) on a daily basis, accessible on OpenAid.dk. Furthermore, reports on specific issues are produced by international organisations like UNFPA to which Denmark contributes with information on activities supported by her on SRHR.

Reports on negotiations, as suggested by the evaluation team, are probably not expedient. In these situations a specific outcome of a negotiation process will most often be a result of a collective effort, where Denmark together with a group of like-minded development partners have contributed towards an achievement. The Ministry of Foreign Affairs finds it in the best interest of this joint work that such results are recognized as a collective effort on a consensual basis.

At country level as documented in both Ghana and Mozambique there is a great interest in furthering the SRHR-agenda in particular as to reducing maternal mortality. (MDG-5). In both Ghana and Mozambique government and development partners work through several channels on taking SRHR forward including policy dialogue, actions on accelerating implementation of MDGs and joint monitoring visits in the field.