FOREWORD
LESSONS FROM AN HISTORICAL YEAR

ADVANCING CONSUMER-POWERED CARE FOR
STRONGER HEALTH SYSTEMS NOW AND IN THE FUTURE

2020 was a year of reflection. The COVID-19 pandemic tragically highlighted problems within our health systems, but also demonstrated poignant examples of ingenuity and adaptability, scientific breakthroughs, and responsive public health practices. We saw that across the globe, universal health care has yet to be attained, as millions of people could not access the care they needed. Yet, there were glimmers of hope and expansion of access as new types of care became available and the burden of care was spread across various actors in partnership: public and private actors, as well as consumers themselves through self-care.

As we continue to live through the pandemic and imagine a world beyond it, we continue to be faced with global challenges and lessons. The pandemic caused serious disruptions in access to basic primary health care services as resources and attention were diverted to pandemic response. This sometimes had a catastrophic effect for women and girls, embodied by PSI’s archetype “Sara”, who need family planning, HIV-prevention and treatment, or a safe abortion.

The pandemic also impacted global economies, resulting in constrained donor budgets and threatening years of hard-won progress on gender equality and sexual and reproductive health and rights (SRHR). Climate change, conflict, record numbers of displaced people, and the resurgence of ultra-conservative forces posed a danger to SRHR too, jeopardizing the wellbeing of billions of women and girls, vulnerable groups, and society at large.

Despite the challenges we faced as a global community over the past year, we saw some successes. Though some European donors curtailed their SRHR budgets, we also identified renewed opportunities to engage with existing and new European stakeholders and donors. 2020 also provided an opportunity to recalibrate our identity and articulate our strengths to meet this moment as a global health player among European stakeholders.

Throughout 2020, PSI-Europe was able to successfully convene partners to advocate for better funding of menstrual health & hygiene (MHH), an integral part of SRHR, WASH and education programmes and a vastly under-funded health area. Behind the rallying call that periods don’t stop for pandemics, PSI-Europe was successful in building new partnerships and making strides in calling funders and investors to support MHH.

We are proud of the results from Programme Jeune S3 and Project Ignite, which have continued to work directly with young people to design interventions to meet their SRHR needs, despite the Covid-related challenges. PSI-Europe worked with the Jeune S3 and Ignite country teams to seek support to sustain these solutions and adapt them to other country contexts and forged a new partnership for Project Ignite with RNW Media to enhance PSI’s digital communities on SRHR in francophone West Africa.

Globally, PSI has adapted over 450 programmes to integrate COVID-19 preventative measures and launched social behaviour change campaigns in a dozen countries. In just three months, PSI was able to reach over 80 million people in South Africa, Kenya, Myanmar and Vietnam with trusted information on COVID-19 prevention and is now building upon these experiences to drive vaccine uptake. To achieve global vaccine coverage and pandemic control, we are creating partnerships with ministries of health, international stakeholders, and local healthcare providers and pharmacy operators across dozens of countries.

There is immense potential to elevate PSI’s work to advance ‘Consumer-Powered Health Care’ among European stakeholders, and the moment is now. If this year has shown us anything, it’s that we are an intrinsically interconnected global community, and we must work together. We need strong partnerships in the frontline: public and private sector players, and consumers as key actors of their own health. And we need partnerships to shape policies and shift funding to user-centred and rights-based approaches, and to realise universal health coverage. (UHC)

The current COVID-19 pandemic and the cracks in the system it has exposed demand creative and urgent solutions. Interest is growing in more cost-effective and efficient service delivery options. National governments, donors and consumers increasingly see opportunity in quality self-administered products (diagnostics, drugs, devices), digital health and a greater role for the private sector. We believe there has never been a better moment to contribute to transforming how healthcare is delivered and financed. Stakeholders in Europe have a key role to play in ensuring that healthcare solutions are rights-based and user-centred while delivering real impact. PSI-Europe invites stakeholders in Europe to join these efforts. Not only to curb the pandemic, but to build stronger health systems that serve Sara now and in the future.

Odette Hekster
Managing Director, PSI-Europe
ABOUT PSI-EUROPE

We’re in the business of improving lives.
PSI-Europe makes it easier for all people to live healthy lives and plan the families they desire.

Our mission is to mobilise support for the PSI network through shaping policies and priorities of European donors and stakeholders. By doing this, we offer organisations, companies, and governments in Europe the opportunity to reimagine healthcare to meet the urgent health needs of people in the Global South.

We believe that we will reach the Sustainable Development Goals faster, with better, affordable and more sustainable health outcomes when we treat beneficiaries more like consumers—when we engage them as active agents in their own health who decide how they will choose and use quality healthcare, rather than as passive beneficiaries of health services. Getting products and services to those who need them is not enough, we also need to delight consumers with their choices and healthcare experiences. By tapping into the expertise of 8,000 local PSI staff in more than 40 countries around the world, we are able to influence impact-driven decisions at scale and are known as an organisation that gets things done in difficult places.

WHAT WE DO

- **We advocate for and mobilise resources for innovative, rights-based and sustainable solutions** to the world’s toughest health issues, contributing to achieving UHC.
- **We influence and contribute to global agendas**, supporting the achievement of the Sustainable Development Goals, strengthening private sector engagement for UHC, and improving primary care networks and consumer-powered care to strengthen health systems.
- **We work toward bridging equity gaps** by advocating and supporting innovative and consumer-powered approaches to reach the vulnerable and underserved, such as adolescent girls and youth in fragile contexts.
- **We shift policies and funding for priority and under-resourced topics that contribute to a world in which no one is left behind** by actively engaging with European stakeholders and donors.

Menstrual Health & Hygiene
One of PSI-Europe’s flagship projects is setting the agenda for menstrual health & hygiene (MHH) as an integral part of SRHR and water & sanitation; whereby we provide technical expertise on MHH to the PSI network and other actors in the community of practice and play a key role in convening and convincing stakeholders to generate support for this under-served and under-resourced theme.

We are changemakers, big-picture thinkers and pragmatists. We make noise and convene unconventional partners. We are bold, build evidence through action, and are not afraid to take risks to move the needle on some of the world’s most persistent health problems.
2020 PROJECTS

**IGNITE**

*Sparking Innovation in youth-empowered healthcare*

Funded by the Dutch Ministry of Foreign Affairs, PSI’s project Ignite sparks change at every level of the health market so that young people can easily access contraception, post-abortion care and legal, safe abortion services in Côte d’Ivoire, Haiti, India, Kenya and Mozambique. PSI-Europe provides overall project oversight and acts as liaison with the Dutch Ministry of Foreign Affairs.

Project Ignite identifies issues in the supply chain and works to resolve them to ensure that adolescent girls and young women can access contraceptives and safe abortion services when, how and where they need them most. By co-designing different components of demand creation with youth, Ignite motivates adolescent girls and young women to seek information and obtain health services from its network of service delivery points. Ignite is working to introduce safe abortion services and support post-abortion care in countries where it is legal while simultaneously working to improve the development and enforcement of policy and legal frameworks supporting SRH services, including access to safe abortion, for young people.

In Côte d’Ivoire, Haiti and Mozambique, PSI takes a market development approach that utilises its marketing acumen and deep understanding of consumers and market actors to examine market failures and address the root causes of why adolescent girls and young women cannot get the healthcare they need, when and where they need it. In India and Kenya, PSI’s partner Triggerise works to develop Tikosystems, which are ecosystems to improve linkages between girls and young women and the different market actors by growing the networks of providers, businesses and micro-entrepreneurs connected in the ecosystem via mobile phones.

---

**JEUNE S3**

*Santé, Sexualité, Sécurité Health, Sexuality, Security*

Funded by the Dutch Ministry of Foreign Affairs, the ‘Jeune S3’ (Santé, Sexualité, Sécurité) programme was a five-year SRHR programme for young people that ended in 2020. Jeune S3 was run by an alliance led by the Dutch NGO Cordaid, with PSI-Europe and the Swiss Tropical and Public Health Institute (SwissTPH) as strategic partners. Technical partners were Free Press Unlimited, IPPF FARO, i+solutions and Triggerise. The Jeune S3 Alliance supported young people aged 10-24 years to make informed choices about their sexual and reproductive health and to have their rights realised. We did this in some of the most challenging and fragile settings in the world: Democratic Republic of Congo (DRC), Cameroon (Far North and East region), Central African Republic (CAR), and Benin (Far North). PSI-Europe was responsible for the programme implementation in Benin and Cameroon.

Young people in conflict-prone and fragile contexts are highly vulnerable. We believe that santé, sexualité, sécurité is an entitlement for each young person, though a major challenge in fragile and conflict-affected areas with limited access to information and services. There, young people live in unstable social and political settings—an environment in which young people’s sexual reproductive health and rights are neither addressed nor recognised. Through its four interlinked pathways—empowerment and meaningful involvement of young people, SRHR knowledge and skills, responsive and youth-friendly services, and creating an enabling environment for young people’s SRHRs adapted to their needs—the JeuneS3 alliance enabled young people to live healthy lives and make free and secure choices about their sexuality, thus changing their future. We created real social impact by ensuring meaningful involvement in this programme for, by, and with young people.

“[Project Ignite] has been able to ‘ignite’ other donors to scale up the approaches used across the countries.”

- HERA, Ignite Final Evaluation
PROMOTING A RIGHTS-BASED APPROACH

For many girls and women, the right to make their own decisions about their bodies and their lives is too often restricted. From hostile legal environments that prohibit contraceptive use among young people and criminalise abortion to pervading provider biases, harmful social structures and deep gender inequalities prevent girls and women across the globe from taking charge of their sexual and reproductive health and rights (SRHR).

PSI-Europe promotes, in collaboration with PSI network members, a unique approach to deliver rights-based programmes by using a user-centric approach to deliver measurable impact on human rights agendas. By working for and with rights-bearers—like women and adolescent girls—and duty-holders—like providers, community leaders, and policy-makers—PSI-Europe advocates for and designs rights-based programming that is user-centred, scalable, and delivers measurable impact. PSI-Europe frames programmes from a rights perspective, targeting specific gaps and barriers in the consumer’s ecosystem that restrict rights, co-designs programmes with users themselves that address these gaps and barriers with empathy and insight, and delivers them through long-standing and locally-based PSI-network members with robust implementation reach and strong partnerships with local governments, private sector and other key duty bearers.

IGNITE

In 2020 in Cote D’Ivoire, Project Ignite made great strides in improving women and girls’ ability to access legal safe abortion services. The project was able to emphasise the government’s role and responsibility as a duty-bearer to ensure that safe abortion services remained available and prioritised during the COVID-19 pandemic. The programme also continued to enhance its ability to measure the impact of SRHR services by developing a DHIS2 dashboard to track activity progress. At the same time, the programme engaged with rights-holders to understand their perceptions of service quality and product availability and to understand the impact values clarification provider training had on client experience.

In Mozambique, Project Ignite partnered with the Ministry of Health to jointly support three provinces to deliver high-quality, legal, safe abortion services through training, supervision, and values-clarification exercises with providers that sought to empathise with the often difficult decisions providers must make and to explore their role as duty-bearers to their patients and communities.

JEUNE S3

In the final year of Jeune S3, the programme in Cameroon continued to support young people to strengthen their voice in their own SRHR by training young people in radio programming and journalism to produce and broadcast 42 radio episodes about SRHR and drug consumption. Young listeners could call and SMS the production team to drive the conversation on the questions that mattered most to them. Co-designed with young people using a user-centred design process, this project empowered youth to become actors of their own development, reaching their peers through their preferred channels with tailor-made content that addressed their key concerns.

The programme also scaled up training of young people in advocacy and awareness-raising. These young leaders initiated their own youth groups and were able to express their needs and articulate their rights during Steering Committee meetings chaired by the Department of Family Health of the Ministry of Health, which brings together decision-makers and duty-bearers. The program engaged other key duty-bearers such as parents and religious leaders, which has also led to an improved environment and greater recognition of adolescent sexual and reproductive rights.

In 2020, the programme in Benin continued to support young people to design their own approaches to take control of their own ASRHR by strengthening the capacity of young people and youth organisations in general management, leadership and advocacy. These youth leaders set up youth advisory councils, which enabled young people to organise joint actions and advocacy to duty-bearers such as local elected officials, religious leaders and health authorities, demanding the free provision of family planning counselling for young people.

The programme worked with duty-holders directly to address barriers to SRHR by sensitising and equipping religious leaders to change harmful social norms that limit girls and women’s ability to realise their rights. The programme trained religious leaders to host SRHR talks and set up multi-faith advocacy teams in their villages. Thanks to their significant authority in these communities, they were able to influence parents to open dialogues with their children and to adopt more supportive attitudes about their children’s access to SRHR information.

Hear more about the impact of Jeune S3’s rights-based programming from the young people themselves who are behind it.

Jeune S3 - Delivering Sexual and Reproductive Health and Rights in fragile contexts | Cordaid
Before the programme, we couldn’t really make any decisions. Our parents would decide everything for us... But with this programme I received all the knowledge I need... We have the ability to decide when it comes to our sexual health.

- Boy, 17 years old, Programme Ambassador, Benin
IGNITING INNOVATION AT SCALE

The international community has made great strides in global health in the last half-century, but significant global health challenges remain as we continue to strive for universal health coverage. Achieving UHC calls for a paradigm shift and innovative and sustainable solutions to some of development’s most vexing problems. It calls for Consumer-Powered Healthcare—our strategy to help shape healthcare markets to work better for consumers in the Global South by approaching health from a consumer’s perspective and by expanding the market for products and services that are affordable, convenient and effective.

We innovate in an interconnected world that is constantly changing. That means we must rapidly test interventions and programmes and optimise them based on their results. We marry cutting edge product development and marketing to solve the world’s most persistent health problems. We develop solutions that engage the people we serve and are designed to last. We are experts at implementing on a grand scale and are known as an organisation that gets things done in difficult places. Through our global network of more than 40 local member organisations and a 50+ year track record of developing cutting-edge health solutions, we’ve demonstrated our ability to take proven health interventions to scale.

PROJECT IGNITE:
Continuous innovation for impact

Nearly 95,000 young women became new contraceptive users in Côte d’Ivoire and Mozambique through Ignite in 2020, which is double from the previous year. This has been made possible because of the constant diversification of techniques to reach the whole spectrum of young women and their influencers. In Côte d’Ivoire, interpersonal communication included Big Sisters, Deaf Peer Mobilizers to engage with adolescent girls (two deaf Big Sisters and two interpreters were trained on SRH topics and data collection to facilitate interactions, and communication materials were adapted to include sign language), Big Brothers to engage boys in discussions around SRH to address gender issues, and parents through the development of a specific approach that fosters an open dialogue about relationships, sex and contraception. Ignite launched a YouTube channel in Côte d’Ivoire in March 2020 to increase reach and complement the Entre Nous Facebook content. The YouTube channel features well-known local actors and SRH providers. Ignite promoted the channel through peer mobilisers, at special events, and through Facebook. After nine months, the 24 videos had been viewed 26,300 times.

Ignite continued innovating with providers. In Côte d’Ivoire, post-partum family planning was introduced in February in a pilot training with ten providers working in the existing clinic network. The training focused on post-partum IUD insertion to meet the needs of young mothers aged 20-24.

The Tikosystem in Kenya currently includes a direct to consumer channel in which young people on the Tiko platform can order subsidised SRHR products and services such as self-injectables, oral contraceptives, emergency contraceptives as well as HIV self-tests straight from their app. This digital, direct-to-consumer channel provides a great opportunity for reaching adolescents at scale. Covid-19 travel restrictions and financial impacts on young people accelerated the channels’ expansion (from an average of 80-100 consultations per month before the pandemic to over 500 per month), and the project expects the level of engagement to continue to grow. The Tiko Explorer app links users with nearby health providers that are part of the network and can generate a referral, either for an on-site consultation or for a teleconsultation. Through a partnership with large franchise pharmacies in Kenya with online presences such as Kasha and Mydawa, contraceptives can be delivered.

“[Project Ignite] used adaptive programming to stay relevant and meet the needs of target populations.”

- HERA, Ignite Final Evaluation
[Entre Nous is] a platform that values women and helps them understand their value. I urge you my sisters to come and discover the pearl that you are. It’s happening on Entre Nous.

– Entre Nous social media user in Côte d’Ivoire
Advocacy and strategic coalition building, as well as building a movement for under-represented and under-resourced themes, are part of PSI-Europe’s overarching strategy to shape the agendas of European stakeholders, with the aim to shift policy and funding of European stakeholders and donors toward mixed health systems approaches to UHC that put consumers at the centre.

PSI-Europe convenes key stakeholders and donors to understand better why certain global health challenges are insufficiently supported and funded. We broker partnerships for joint action, have intimate conversations with key stakeholders and hold wider consultations to set the advocacy agenda and identify opportunities to shift policies and funding.

MAKING THE CASE FOR INVESTING IN MENSTRUAL HEALTH & HYGIENE

2020 was a successful year for PSI Europe’s work to foster partnerships to shift policies and priorities of European donors and stakeholders towards MHH, which culminated at the end of the year in the launch of a guide Making the Case for Investing in Menstrual Health & Hygiene. This first-ever guide is the product of a joint initiative by PSI-Europe and Simavi and was co-developed with PSI, The Case for Her and WASH United. Together, the partners researched the motivating factors and barriers to investing in MHH, including through intimate consultations with a range of funders, technical experts, and implementers about their experiences and barriers to funding MHH.

The guide was drafted following these consultations, and larger regional consultations were held to convene the community of practice, hear perspectives from the field, gather feedback to incorporate into the final guide, and gain commitment from funders. The document was launched through coordinated promotions by the authoring partners. The document is now used by the Global Menstrual Collective, its partners, the Menstrual Health Hub, and other international partners to move the needle on under-represented and under-funded areas of MHH.

NEW & LOCAL FUNDING MECHANISMS

After a successful Season 1 of Aquele Papo (The Talk), a TV teen drama locally produced by Project Ignite in Mozambique to engage teens about health and wellness by weaving important topics into the lives of characters Mozambican teens love and can relate to, 2020 saw the development of an even more successful Season 2 through non-traditional partnerships and funding mechanisms. The high-quality production and success of the show attracted commercial and social enterprise partners, including sumal+compal, BeGirl, Jeito, LAM Mozambique Airlines, and Miramar. The second season of Aquele Papo proved even more successful than the first, with extremely high viewership and online engagement, including over 3 million views and 9 out of 10 TVs in Mozambique tuning in.

These commercial partnerships allowed Project Ignite to improve the show’s production quality further, leading to a committed fandom and delivering important health and well-being messages to adolescents. Aquele Papo is becoming a cultural phenomenon, and the show’s popularity is contributing to a shift in the national dialogue. The project looks forward to a successful Season 3, also partly funded through innovative funding mechanisms.

This report presents a compelling overview of WHY menstrual health and hygiene (MHH) must be a core part of the gender equity agenda.

- Laura Amaya & Flynn Lebus, Gender Practice Co-Leads, FSG
Making the Case for Investing in Menstrual Health & Hygiene will hopefully help more funders enter the menstrual health and hygiene landscape with the confidence to make these critical investments. By expertly outlining the strategy of where and how investments should be directed for the most impact, this report removes the guesswork and uncertainty that contribute to this important area of women’s health being overlooked and underserved.

- Kajsa Åberg, Managing Director, af Jochnick Foundation
PSI-Europe’s vision for MHH is to bring care closer to users and put more care and control directly into their hands by advocating for Consumer-Powered Care.

PSI-Europe advocates and provides guidance to meaningfully integrate MHH into SRHR and WASH programming and policies, as MHH is a critical component of these health areas. As described in our technical brief on the subject, integrating MHH into these existing services is critical for a fuller understanding and experience of one’s reproductive health and rights and a critical element of a WASH programme to achieve gender equity. As MHH is inherently cross-cutting—relating to the management of one’s menstruation as well as to broader systemic factors that link menstruation with health, well-being, gender, education, equity, empowerment, and rights—a collaborative and integrated approach is required and will help girls and women access the information and the care they need. PSI-Europe emphasised this need for integrated funding and strategy through its work on the report, *Making the Case for Investing in Menstrual Health & Hygiene* and was recognised as a technical leader in this space and invited to collaborate with UNFPA on the development of UNFPA’s *Technical Brief on the Integration of Menstrual Health into Sexual and Reproductive Health and Rights Policies and Programmes*, which was developed in 2020 and published in 2021.

PSI-Europe works to reduce the menstrual equity gap by advocating for the use of solutions that meet consumers’ needs. For example, we’re working to forge partnerships between actors developing new adolescent menstrual tracking apps with those implementing adolescent programs. In places where girls don’t have access to a smartphone with an internet connection, we promote the development of non-digital solutions. Making Consumer-Powered Healthcare equitably accessible means removing financial barriers to accessing information, products and services.

PSI-Europe helps strengthen voice, choice and agency by supporting our PSI network members and partners to provide comprehensive and period positive MHH information that can empower girls and young women with body literacy. For example, PSI Zimbabwe trained peer mobilisers to educate young girls about MHH as an entry point into ASRHR and provided a safe space where girls can learn about their bodies and open up about sexuality issues without fear of being stigmatised in the community.

PSI-Europe advocates throughout our MHH work to give consumers a choice about which period products she wants to use. The number of MH businesses is growing exponentially, and continued menstrual product innovation helps expand consumers’ options and increase their access to them. Menstrual solutions are as diverse as the people seeking them, and we focus on informed and enhanced choice, agency, and decision-making, rather than promoting a single product. In everything we do, our focus is to promote the dignity of consumers and their agency in making one’s own choices, by oneself and for oneself.

Through building the evidence base of the value of the integration of MHH in SRHR and WASH and education programmes with the support of both public and private sector actors, by increasing technical expertise on this topic, and by identifying opportunities for MHH to be integrated into programmes and funding, PSI-Europe has positioned itself as an international thought international leader in the MHH space.
COVID-19 is threatening health systems and vulnerable populations around the world. As the world faces the uncertainty of a global pandemic, the PSI network is on the front lines. PSI is applying its 50 years of expertise to ensure that the people it serves get access to critical self-care, prevention and healthcare services during the COVID-19 crisis.

While the global scientific and public health communities are working with unprecedented speed to develop, test, and bring to market vaccines to protect against infection with COVID-19, PSI was quick to organise itself to contribute to large-scale uptake of a COVID-19 vaccine as a necessary component of pandemic control.

In November 2020, PSI disseminated a concept note to promote and sustain vaccine confidence, building on PSI’s long-standing experience responding to infectious disease emergencies in its 50-year history, including Cholera, Ebola and Zika. PSI-Europe played an important role in sharing and discussing this concept note with key stakeholders, including GAVI, in Europe.

PSI leverages this expertise for its ongoing COVID-19 response, as well as to inform its COVID-19 vaccine uptake initiative. PSI’s goal is to deliver effective, evidence-based, people-centred social behaviour change (SBC) interventions to communities. The interventions will provide answers to questions, dispel fears and myths, and continue to encourage prevention strategies while ultimately promoting vaccine uptake.

PSI teams already work closely with several government partners in support of national COVID-19 response plans by coordinating messaging and SBC campaigns to support COVID-19 testing and contact tracing, training frontline health care workers on safety protocols and guidelines, and sharing research insights gathered from target groups related to preventive behaviours.

Building on this, PSI can further support SBC campaigns that target individual consumers and community health workers through three key mechanisms:

- Building real-time insight
- Delivering effective behaviour change support
- Harnessing the power of partnerships

Like every project and organisation, Ignite suffered from the COVID-19 pandemic in 2020. Lockdowns and restrictions related to the pandemic have affected each country, disrupting programme plans and leading to a number of rapid adaptations. However, the resilience of country teams has been astonishing. In 2020, PSI and Triggerise took all precautionary measures, in line with local governments’ guidelines, to protect beneficiaries and staff from Covid-19 infection, including social distancing, procuring personal protective equipment, and developing and integrating Covid-19 prevention messages into communication platforms such as Entre Nous in Côte d’Ivoire and Aquele Papo in Mozambique.

Both organisations have adapted to restrictions that have impacted service provision as well as mobilisation activities, and PSI has updated its protocols with support from PSI’s Global Medical Team. Interpersonal activities and mobile service delivery were reduced and then adapted to ensure appropriate safety for all. Teams leveraged social media to continue to engage with clients in meaningful ways and at a large scale during reductions and changes to interpersonal activities. For example, in Mozambique, Aquele Papo reached over 100,000 followers and more than 110,000 engagements per publication. The Ignite team continuously refined online content based on interactions with users and analytics.

Triggerise has used technology in different ways to tackle the Covid-19 crisis by increasing subsidy for contraceptives through electronic vouchers (demand for contraception was climbing during Covid-19 while beneficiaries’ financial resources were decreasing) and by developing Covid-19 surveillance and monitoring modules for the Tiko Pro app, which will be implemented in 2021.

**SPOTLIGHT: COVID-19**

**GLOBAL RESPONSE**

**LOCAL RESPONSE**

**PSI is applying its 50 years of expertise to ensure that the people it serves get access to critical self-care, prevention and healthcare services during the COVID-19 crisis.**
21 MILLION DALYS* AVERTED

12 MILLION CYPS* PROVIDED

24.8 MILLION USERS REACHED

1.7 MILLION SAFE ABORTION PRODUCTS & SERVICES DELIVERED

471,209 CYPS* PROVIDED

78,833 young people RECEIVED COMPREHENSIVE SEXUALITY EDUCATION

5,737 young people RECEIVED MODERN CONTRACEPTIVE COUNSELLING

*Disability-Adjusted Life Year
*Couple-Years Protection
Jeune S3 Achievements from Benin & Cameroon
Ignite Achievements from Côte d’Ivoire, India, Kenya, and Mozambique
Over the life of the Jeune S3 programme, 929 young people in Benin and 529 young people in Cameroon were meaningfully involved in the programme and played an active role in SRHR promotion.
Thanks to Ignite, young women have voluntarily adopted an increasing number of implants or intra-uterine devices (IUDs). In Mozambique, method mix results demonstrated a shift in proportion of oral contraception users from 51% at the beginning of the project to 37% at the end of 2019, while the use of implants grew from 14% to 23% over the same period. FP 2020’s annual progress report shows that implants only represented 6.6% of Mozambique’s method mix in 2019. In Côte d’Ivoire, IUDs are increasing in popularity among AYGW 15-24 in Ignite intervention areas, with an increase from 0.2% in 2018 to 2% of the methods administered on Ignite project sites in September 2020.
2020 EXPENDITURES

Expenditures by Objective (€ ’000)

- Jeune S3: 401
- Ignite: 550
- Technical Assistance, Representation & Advocacy: 212

Total Expenditures (%)

- Jeune S3: 43%
- Ignite: 9%
- Technical Assistance, Representation & Advocacy: 31%
- Fundraising: 16%
- Management & Administration: 43%
If you’d like to partner with us,

**VISIT US**
https://www.psieurope.org/

**EMAIL US**
ContactPSIEurope@psi.org