Serbian Association for sexual and reproductive health – SRH Serbia (member of IPPF)

**STRATEGIC PLAN 2021 - 2025**

**December 2020**

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## EXECUTIVE SUMMURY

This document presents the SRH Serbia Strategic plan, 2021-2025. The strategic plan reaffirms the relevance of the current strategic direction of SRH Serbia, the goal entailing freedom from reproductive coercion, access to sexual and reproductive health and reproductive rights services with focusing on women, adolescents and youth. This strategic plan describes the transformative results that will contribute to the advancement of gender equality and the empowerment of women and adolescent girls. The strategies introduced in the strategic plan take into account the lessons learned from previous plan cycles.

We are keenly aware that the world is far different place now than it was a year ago, and we also are a far different society. Covid-19 has brought forward a never clearer vision for solidarity and bridging gender gap. At its core, Strategic Plan reaffirms our vision and ambition. Others may try to resolve current difficulties through significant mission redefinition. SRH Serbia remains convinced of the value. We believe it represents our best response to current and future challenges. These challenges are, we know, very real. Strategic Plan is indeed structured around a series of major concerns that we, with many other institutions of our type, face. And it outlines the distinctive ways in which SRH Serbia will address these, always seeking to draw upon sense of purpose and demonstrated ability through innovation to turn difficulties into opportunities.

The past four years have marked significant accomplishment for SRH Serbia. Growth and innovation across almost all dimensions of the institution have allowed us to establish a truly distinctive and worthwhile gender transformative educational programs as well as expanded resources. The planning process embraced transparency and built consensus by soliciting input from our partners. Our Strategic Plans is not a mere letter on the paper but a document well-used by many members of our staff and partners and volunteers likewise. As such, they have served as a significant guide for our decision-making and actions.

Despite the times, we engage in the task of charting our path forward with optimism born of the momentum generated by our earlier planning efforts. SRH Serbia has in the past four years established a more prominent position among Serbia’s leading NGOs in the sphere of sexual and reproductive health and rights. Strategic Plan is a blueprint for turning our momentum into long-term success.

The challenges which confront us are multifaceted. Therefore Strategic Plan touches upon virtually all aspects of the institution. It centers, however, on our beneficiaries and our volunteers - from their experience to their lives and major contributors to our story and lives. We direct our energies and resources exclusively to client centered approach. Our success ultimately rises or falls with our ability to provide our beneficiaries with accountability in actions, transparency in overall work, one that creates better opportunities, informed decisions of meaning to their ownership over their lives and accomplishment.

## INTRODUCTION

In 2016. SRH Serbia developed three years Strategic framework (2016 - 2019) that was completely aligned with the IPPF Strategic framework. Since the Strategic plan expired, in October 2020. SRH Serbia conducted an evaluation of the Strategic Plan. Based on the information gathered through the evaluation process and communication with partners, SRH Serbia reviewed and updated the Strategic Plan in order to better correspond to the current contextual situation and consequently to the improvement of SRHR needs of our beneficiaries. The strategic plan will build on the progress achieved in the previous period through addressing the remaining challenges in the areas of sexual and reductive health and rights, and draw on the evidence and the lessons learned from the previous strategic plan cycle in order to improve its approaches and strategies. Evaluative evidence has shown that the strategic goal of the previous strategic plan continues to be a relevant, valid and effective approach in enabling access to SRHR.

The 2021-2025 Strategic Plan has been developed through a multi-stakeholder participation approach in order to ensure that SRH Serbia works in partnerships with staff, beneficiaries, NGOs, the governmental sector, the international community and the private sector. The goal of the reviewed Strategic plan is to advance access to sexual and reproductive health, realize reproductive rights and reduce gender inequality in order to improve the lives of women, adolescents, youth and other vulnerable individuals with unmet needs.

As we set our strategic directions for the next five years, we commit to working better together, characterized by stronger coherence and collaboration. Together we will step up our joint efforts, with a sense of urgency, to better support vulnerable individuals to access to SRHR. The principles of leaving no one behind and reaching the furthest behind first permeate all four of our strategic goals.

We will enhance multi-stakeholder partnerships through reflecting the people-centred approach. SRH Serbia will build on recent progress in engaging beneficiaries, especially young people through volunteerism, empowerment, participation and other means to strengthen ownership and capacity. We will also intensify collaboration through multi-stakeholder partnerships at national and local levels and assist in improving mutual accountability for SRHR in such partnerships.

We will enhance efficiency together through underpinning the drive for ever-greater effectiveness and building on the progress made in recent years through the developed organizational standards and procedures, thus continuing to accelerate efficiency gains through organizational operations strategies, mutual recognition, and broader operational harmonization.

## DEVELOPMENT OF STRATEGIC PLAN

The process of development/review of SRH Serbia Strategic Plan had 4 phasis:

1. Gathering information
2. Analysis of information and identifying the key strategic issues
3. Revision of strategic drivers
4. Revision of strategic priorities under the strategic outcomes
5. Drafting the Strategic plan document

In the process of development of Strategic Plan SRH Serbia used various tools for gathering the necessary information:

1. Redefining organizational mission and vision statements
2. Stakeholder analysis (Annex 1)
3. SWOT analysis (Annex 2)
4. PESTEL analysis (Annex 3)
5. Collection and analysis of necessary data

The mission, identity, strengths, weaknesses ,opportunities ,threats and stakeholder analysis were analyzed together in order to identify the key strategic priorities that the organisation will address in the next five years. Based on the analysis conducted, strategic priorities and objectives were reviewed in order to correspondent to current context and reality.

On the basis on previously gathered, analysed, prioritised and organized relevant contextual information – both static and dynamic, SRH Serbia revised a set of seven strategic drivers developed in previous strategic planning phase.

The strategic divers are as follows:

1. Pro-natalist political environment and growing opposition to SRHR

2. Continuous medical education and CSE programs in Serbia

3. Human rights violations and gender inequality

4. Limited access to contraception and other SRHR services

5. Funding environment

6. Limited opprtunities for civil society

7. Volunteerism and the lack of sexual awareness among youth in Serbia

**1. Pro-natalist political environment and growing opposition to SRHR**

In the last three years there is increased influence of pro-natalist forces on development of SRHR legal framework in Serbia. Equivalent to other European countries, opposition movements are omnipresent in Serbia, deeply infiltrated in right-wing political options and Orthodox church. Supported by fingerprints of hybrid state regime and populism discourse, opposition movements reinforcing anti-SRHR legislation.The existing social and political autism in Serbia as accompanying syndrome of radicalization does not recognize sexual and reproductive health and rights and gender freedom as fundamental human rights.

Despite claiming that Serbia is firmly committed to the European path and EU membership, government officials are not changing their relations with the civil sector, which they consider to be an enemy rather than an ally on this path. There is a raising trend of shrinking the space for civil society through weakening it and creating government-obedient NGOs. These organizations are supported by governmental authorities and pro governmental media and focus of their interests are authentic to government issues. The aim of GONGO operation is discrediting and creating of nonsense and confusion in public regarding the work and attitudes of authentic civil society organizations.

Despite Serbia ratified all important international treaties related to SRHR, the level of its’ integration into national legal framework and implementation can assess as rather poor. There is a lack of action plans and allocated budgets for implementation of commitments/actions perceived by SDGs, ICPD+25 etc. The National programme for preservation and improvement of sexual and reproductive health and rights of citizens of the republic of Serbia, adopted in the end of 2016. as first strategic document in the area of sexual and reproductive health still is not properly implemented, meaning that the Action plan is still in draft phase and the allocated budgetary funds were reallocated to “burning” government issues.

**2.** Lack of sexuality education in schools and in continuous medical education

In the past three years situation with the access to comprehensive sexuality education was not changed at all. Still, prejudices are the one of the key hallmarks in the area and they are present among the vast variety of groups: general population, beneficiaries of SRHR activities, school pupils and students as well as medical professionals. This is on top of the insufficient knowledge on reproductive health, rights, available resources and other important aspects of reproductive health among general public, but also among decision-makers, media and beneficiaries.

National educational system pays insufficient attention to reproductive health (and almost completely ignores sexual rights) and there is no sexuality education in school curricula. The Serbian educational system need to be seriously reformed, which requires strong political will and understanding of the significance and impact of comprehensive sexuality education programmes on the reproductive health of youth. Reproductive health in schools is presented cursory manner so pupils usually do not acquire knowledge that provides them either with comprehensive understanding of human sexuality, its health, social and human rights aspects or even with the up to date information related to family planning, sexually transmitted infections and the like. Although the situation is improving with introduction of optional curricula on reproductive health and rights in some schools, there are still strong taboos associated with the subject across the society. Where relevant information and knowledge are made available, the transition to new or changed behaviours is slow.

In Serbia the health care system is more focused on treatment than on prevention. Gynecologists’ attitudes against family-planning and myths on contraception represent major barriers to the creation of specific programmes for continuous medical education in the area of reproductive and sexual health and rights.

Likewise, modern family planning and reproductive health topics are scarce during university medical education and almost completely absent from the continual education of medical professionals. The lack of knowledge and sensitivity of the medical professionals related to the areas of sexual and reproductive health contributes to the general negative attitudes related to the modern family planning methods, without understanding of the human right to choose among different offered options. Modern family planning methods are not standard and ruling option in domain of protection of reproductive and sexual health in Serbia.

**3. Human rights violations and gender inequality**

Holders of legal entitlements (the citizens of the Republic of Serbia as well as strangers in domain of laws that are valid and for foreigners who stay at the territory of Serbia) i.e. as present or prospective beneficiaries of SRHR services are generally poorly informed about their rights and how to exercise them. Lot of members of vulnerable groups do not have information regarding their rights neither, since they are "legally invisible" and institutional system do not recognize them as potential beneficiaries of services. The reason lies in the fact that there is no adequate mechanism for rapid response in the case of violation of human rights. Strategic documentation in this area generally have no action plans with defined budgets. Discrimination of the marginalized groups is present across all sectors (health care, social protection, education, employment), although the state stipulates and guarantees the equality of all its citizens by law.

The past years have also been marked by the drafting of various key legal frameworks such as the Draft Law on Gender Equality, the Anti-discrimination laws and the Law on the prevention of domestic violence. Unfortunately, they are lacking adequate implementation.

Additionally, NGOs and other civil society actors have been facing new a new set of threats to women’s rights and gender equality through a growing banalisation of anti-gender discourse that has become increasingly mainstreamed even at the highest political spheres.In the past few years, there has been a growing trend to challenge and undermine efforts to combat the root causes and effects of gender discrimination and the struggle for gender equality by assimilating them to a so-called “Gender Ideology”. This so-called “Gender Ideology” is portrayed by conservative – often religious – lobby groups as an attack to the core “traditional values” of society. The struggle for gender equality is thus framed as an “imposition of ideas and beliefs that seek to destroy such institutions as the family, marriage and religious freedom”.The anti-gender discourse in Serbia has become a key element in populist far-right and nationalist parties that have political successes and a return to the mainstream national political debate. While the rise of these parties share similar factors as in other European countries such as the economic, political and national identity crises fomenting a favourable environment for such discourse to resonate with public opinion, the Serbian political panorama also saw the rise ultra right-wing organisations – which have become more and more active in the public sphere – that build heavily on “the apology of war crimes, the obsession with national humiliation and victim status, as well as advocating national revanchism”

There is in fact a re-establishment of traditional gender roles and responsibilities regarding women and men’s expected roles within the family and society that constitute a worrying obstacle to the guarantee of women’s access to equality especially in their professional careers and participation in public life. While women’s basic rights such as the right to education, health, abortion, divorce and the choice of professional career are technically enshrined in the State’s legal apparatus, the current public discourse offered by many political leaders appear to threaten an erosion of these essential rightsMoreover, the mainstreaming of populist right-wing discourses – the protection of traditional gender roles being one of its cornerstones – has created favourable conditions for government leaders to either discredit any claim for gender equality and non-discrimination of women and LGBTQI persons as part of a “gender extremist” agenda that is foreign to the Serbian national context.

One cause of concern is the exacerbation of these gender stereotypes via the Strategy for Encouraging Births aimed at pushing for higher birth-rates in order to mitigate the low fertility rate and subsequent population decline Serbia has been facing (the birth rate is a little lower than the European average).As mentioned in [FemPlatz and Initiative A11 for Economic and Social Rights submission for the CEDAW’s LOIs](https://tbinternet.ohchr.org/Treaties/CEDAW/Shared%20Documents/SRB/INT_CEDAW_ICO_SRB_31783_E.pdf) to Serbia, the promotion of the population policy included calls for natalist slogans with awards going to slogans such as “Give birth, don’t delay,” “Enough words, let us hear the baby’s cry”. Instead of taking into consideration the backlash this policy and especially the slogans provoked, the Serbian President defended his measures and expressed his disdain to the opponents of this policy.The stereotypical approach to encouraging births, implying motherhood should be a woman’s primary role should be addressed with serious concern and adds to further pressures women must face especially in their career and life choices, their social status and their core right to decide on whether to have children or not and when to have them.

1. **Limited access to contraception and other SRHR services**

In the past three years there is low level of improvement made in enabling access to SRHR. Right to choice in reproductive health is still limited, especially among vulnerable groups. The market presence of modern contraceptive methods is poor with lack of demand on the part of users and lack of comprehensive knowledge on the part of health professionals. Some of modern contraceptives are not available on the market (injectable and implants) and the reasons stated were that pharmaceutical companies are not interested in the small market of a country with a low contraceptive prevalence. The traditional contraception, coitus interruptus (CI) and the method of fertile days as well as the induced abortion are still the commonest forms of birth control in Serbia. According to the MISC Statistical report 2019. traditional methods are dominant and are used by 41 percent of women, while modern methods are used by 21 percent of women. The most popular method is withdrawal, which is used by 31 percent of married women in Serbia as a whole, followed by male condom, which is used by 15 percent of women. Contraceptive prevalence ranges from 55 percent in the Belgrade region to 69 percent in Southern and Eastern Serbia. Prevalence of any modern method rises with  
level of education and wealth. Only 11 percent of women with primary education use any modern method compared with 27 percent of women with higher education. Only 13 percent of women living in the poorest households use modern methods, compared to the richest households where twice as many women use a modern method (27 percent of women). More than one-fifth of women (22 percent) who are married or living in union have never used any method of contraception, the main reason reported by these women being that they wanted to get pregnant (71 percent).

Access to services related to reproductive (and general) health is difficult and complicated in some cases and areas – either for logistical and geographical reasons or due to the administrative inefficiency and corruption in health. As for the male population, reproductive health services are poor and insufficient. Government Youth counselling services do not function at all and consequently young have not the ability to access to youth friendly reproductive and sexual health services through the primary health care system. Young people in general, in the Republic of Serbia are a population category that is exposed to special risk factors that could lead to reproductive health damage.

Gynecologists’ attitudes against family-planning and myths on contraception were identified as major barriers. Many gynecologists based their professional advice on misinformation and on their own personal opinions of modern contraceptives rather than on sound, evidence-based medicine. Still there is a need for building the capacity of service providers to provide family planning/contraceptive services through pre- and post-graduate education, including use of modern technology such as distance learning and develop mechanisms to address the motivational issues of service providers. Pre-graduate education in Medical Faculties in Serbia does not include a mandatory course on modern contraception,so students are free to choose it if they want to attend or not.

1. **Donor driven funding environment**

Leading global donors often do not take into account differences between countries in respect to their developmental level, geographic location, key issues etc. and since the struggle to stay financially healthy is happening at a shrinking market – with Serbia being recently designated as a middle income country donors are fewer and criteria for donations higher –NGOs and CSOs often end up adjusting their interests to correspond with present donors and their priorities rather than pursuing their own core values and programme goals. This creates a donor driven market that does not necessarily correspond with the actual needs of the society. In addition, market-oriented way of thinking–considering own unique selling proposition and competitive advantages – is not attributive or intrinsic to majority of NGOs in Serbia.

**6. Weak civil society**

NGO sector in Serbia lacks systems and capacity and organizational capabilities when managing larger projects, as discussed with potential donors or partners. Likewise, management of received funds can be less than transparent as for many organisations it can be more about survival than about reaching project objectives. In a broader context, Serbian CSOs should be better integrated and involved with relevant international processes, especially the ones that Serbia has pledged to fulfil.

Bearing in mind all the aspects of weakness of CSOs in Serbia in the area of SRHR it is necessary to invest in development of CSOs capacity to advocate for SRHR.

Civil Society in Serbia is mostly focused on services and lacks both the understanding of public advocacy and the capacity to perform it. The needs to build this capacity exist at all levels, local, provincial and national. The EU accessions process, however, grants opportunities for this capacity to be built through project funding. SRH Serbia understands the need to develop relationships with natural partners in the civil sector, those organisations dealing with health and human rights issues who need to have their capacity built in order to join a wider front of advocacy initiative. SRH Serbia will therefore be working on expanding the existing NGO forum to include local level and other national CSOs and agree a common agenda for advocacy, including joint actions around specific events and opportunities using the opportunities provided by the EU accession process. It will explore and develop strong evidence based arguments in coordination with other CSOs to address challenges related to sensitive topics such as infertility, surrogacy, migrants, IVF or to anti-choice groups.

**7. Volunteerism and the lack of sexual awareness among youth in Serbia**

Youth in Serbia in general are very conservative, especially when it comes to sexual and reproductive health and rights. The reason for this situation lies in the lack of knowledge and programmes for empowerment of the youth to talk about sexuality, pleasure, sexual choices and rights to freely make informed choices related the sexual and reproductive health.

Young people in Serbia are sexually active, but less likely to use condoms. Also, the percentage of use of modern contraceptives is very low. One of the reasons lies also in traditional ways of growing up, conservative environment, pro-natalist approaches and influences of radical fractions.

Volunteers programme that running SRH Serbia is a crucial for young people in Serbia to learn about their sexuality, right to choice and how to advocate for their reproductive health and rights as fundamental human rights. Peer to peer learning and sharing knowledge is crucial in the process of changing of discriminatory and conservative attitudes among youth in the areas of SRHR.

Creation and spreading volunteer networks represent the best way to influence on youth people to change their opinion and behaviour and to become agent of change in the SRHR areas.

## STRATEGIC IDENTITY

Strategic identity, articulating how SRH Serbia exists, what it wants to achieve and how it functions, includes a vision statement, a mission statement and a set of values.

**SRH Serbia’s Vision Statement**

Our vision is to create a society in which all people have the economic means, social capital, and political power to make and exercise decisions about their own health, family, and future, free of discrimination AN

**SRH Serbia’s Mission statement**

SRH Serbia is the champion for SRHR working to develop and uphold standards and create an environment in which every woman,girl and individual with unmet needs can exercise its’ human rights and live up to its’ full potential.

**SRH Serbia’s values**

Our core values guide the way we undertake our work. In SRH Serbia we believe:

**A people centred approach:** SRH Serbia believes that population issues are not merely a matter of “numbers” but rather the value of each and every human being. SRH Serbia prioritizes the human-centered perspective in the promotion of sexual and reproductive health and rights

**Health, dignity, and justice:** We believe in the principles of health, dignity, and justice and work that is community rooted, culturally responsive, and sex positive

**Responding to needs:** SRH Serbia responds with speed and flexibility to the needs of individuals, and the society in order to protect sexual and reproductive health and rights. In doing so, it engages with the challenges of a constantly changing world

**Ensuring gender equality:** SRH Serbia believes that ensuring gender equality and equity is imperative to the promotion of sexual and reproductive health and rights, world development and poverty reduction

**Being independent from politics, ideology and religion:** SRH Serbia is an independent and non-political organization, and has no religious affiliation. Its beliefs and philosophy are centered firmly on the commitment to promoting sexual and reproductive health and rights for all

**Working in partnerships:**  SRH Serbia works in equal partnership with non-governmental and government organizations, civil society and private sector organizations, international agencies and specialized institutions for advocating and promoting sexual and reproductive health and rights for everyone.

**Attaining in international goals:** SRH Serbia is firmly committed to the goals and targets of the Program of Action adopted at the 1994 International Conference on Population and Development (ICPD) and the United Nations Sustainable Development Goals (SDGs)

## STRATEGIC OUTCOMES

**OUTCOME 1**

The Republic of Serbia’s institutions respect, protect and fulfil sexual and reproductive rights and gender equality.**OUTCOM 2**

People in Serbia act freely on their sexual and reproductive health and rights **OUTCOME 3**

Full spectrum of sexual and reproductive health services offered and provided in Serbia **OUTCOME 4**

High level performing and accountable MA

**To enhance national and local decision maker’s knowledge and capacities to adopt SRHR legislation including implementation budgeting and monitoring mechanisms**

**Mobilize and strengthen women and youth NGOs to advocate for SRHR related legislation sustain strategies and laws in the area of gender equality**

**Empower youth in Serbia to access comprehensive sexuality education and and realize their rights**

**Engage media and opinion leaders in promoting SRHR with the aim to influence key decision makers**

**Increase delivering SRHR rights - related services in MA practice**

**Enable SRHR services delivery through public health institutions in Serbia**

**Enhance organizational effectiveness and resource mobilization management**

**Increase network of SRHR volunteers and activists to advocacy**

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| **Outcome 1**  **The Republic of Serbia’s institutions respect, protect and fulfil sexual and reproductive rights and gender equality.** |
| **Objective 1.1** **To enhance national and local decision maker’s knowledge and capacities to adopt SRHR legislation including implementation budgeting and monitoring mechanisms** |
| Despite Serbia made commitments to support sexual and reproductive health and rights and to enhance gender equality through the development, adoption and implementation of supportive SRHR and gender legislation, in reality, many women, girls and other vulnerable individuals are not able to exercise their human rights.  SRH Serbia will focus first on increased utilization of integrated sexual and reproductive health services and reproductive rights for those who are furthest behind. By 2025 SRH Serbia will advocate for the enhancement of national capacities to develop and implement policies, including financial protection mechanisms, that provide integrated sexual and reproductive health services that benefit women, girls, adolescents, youth and other vulnerable groups and to design and effective implementation of national-level programmes that prioritize access to information and services by women, girls, adolescents, youth and individuals with unmet needs who are furthest behind, including in humanitarian settings. SRH Serbia will also address the sexual and reproductive health needs and the reproductive rights of those considered most vulnerable, especially those living in poverty.  In accordance with ratified international standards, SRH Serbia will continue to support capacity-building and the implementation of comprehensive and essential reproductive health services. SRH Serbia will also support the generation of evidence to eliminate barriers to the full exercise of sexual and reproductive health and reproductive rights.  SRH Serbia will focus on increased domestic accountability that involves all health-system stakeholders, including communities, to strengthen services and the demand for sexual and reproductive health and reproductive rights. This will be achieved by policy and advocacy dialogue that seeks to remove legal and policy barriers impeding access to services and rights; strengthening information and data collection; fostering strong national ownership and domestic investments that reach women, adolescents, and youth, emphasizing those who are furthest behind, including in all phases of humanitarian action; and mobilizing and supporting mechanisms for the broad participation of civil society, especially women and young people, in developing, reviewing and monitoring national health plans. |
| **Objective 1.2:** Mobilize and strengthen women groups and youth NGOs to actively and in coordinated way advocate for SRHR related legislation, sustain strategies and laws in the area of gender equality |
| Gender equality and the empowerment of all women and girls are crucial to achieving sexual and reproductive health and reproductive rights. Gender equality and the empowerment of women and girls, including their reproductive rights, are centrally positioned within the 2030 Agenda. Sustainable Development Goal 5 and its nine targets address gender-equality priorities, including targets to end all forms of violence against women and girls, eliminate harmful practices, and achieve reproductive rights for all women and girls. Gender equality and human rights are essential to reaching those furthest behinds.    SRH Serbia will focus on strengthening capacity of women and youth NGOs for response to eliminate harmful practices and to prevent and respond to gender-based violence, including sexual violence and sexual exploitation and abuse including in humanitarian settings. These areas of involvement require the mobilization of NGO strengths for enabling legislative and policy environment and the elimination of discriminatory gender and sociocultural norms that affect women and girls. Capacity development will be advanced through institutional strengthening, building and using a knowledge base (knowledge management), promoting and strengthening partnerships with a focus on learning, focused thematic trainings and promoting performance standards and good practices for gender and SRHR components.  To advance gender equality and the empowerment of women and girls, SRH Serbia jointly with women and youth NGOs will strengthen policy, legal and accountability frameworks. This includes support to international and national human rights mechanisms. These mechanisms will monitor the implementation of human rights obligations that empower women and girls and that guarantee equal access to sexual and reproductive health and rights, regardless of marital status, age, or third-party authorization.  By 2025 SRH Serbia will create greater, capacitated women groups and youth NGOs network with a strong influence on the legitimacy of political decision related to the sexual and reproductive health and rights and gender issues at the national and local level. SRH Serbia jointly with NGOs network will oversee mechanisms for monitoring and evaluation of national and local policies. Women groups and youth NGOs will be involved in all segments of development, implementation and budget allocation in the area of SRHR and gender issues at all levels, which will ensure government accountability. |

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| **OUTCOME 2**  **People in Serbia act freely on their sexual and reproductive health and rights** |
| **Objective 2.1 Empower youth in Serbia to access comprehensive sexuality education and realize their rights** |
| Youth in Serbia is one of the most marginalized groups when it comes to information and knowledge related to the exercise of their sexual and reproductive health and rights. Expand the capacity of youth in Serbia to freely access SRHR services and information is crucial to make the right decisions and choices that will have a positive effect on their lives. Young people are the best champions to advocate for their own SRHR and to deliver peer-to-peer comprehensive sexuality education. It is especially important in the regions with strong informal barriers to SRHR where present and potential beneficiaries are not able to get relevant information in their families, schools and often in local health organizations.  SRH Serbia is committed to investing in youth and underscores the rights of adolescents in development and the need to capitalize on the potential of adolescents and youth to contribute to positive social transformation. The Programme of Action of the International Conference on Population and Development recognizes that the effective realization of sexual and reproductive health and reproductive rights requires the empowerment of all sectors of society, including adolescents and youth, and the promotion of their participation in the design of policies.  A focus on girls during early adolescence is critical: the right decisions made during this period can avoid adverse health and development outcomes for the girl, the community and society. If these investments are made, harmful practices such as child, early and forced marriage will no longer directly threaten the human rights, health and well-being of girls. Girls in Serbia will be able to complete basic education, avoid early pregnancy and contribute to greater economic growth. Furthermore, such investments will lead to lower rates of maternal and infant deaths and lower HIV prevalence.  SRH Serbia will intensify its evidence-based advocacy, policy engagement and programme efforts to strengthen national commitments to prioritize, invest and empower adolescents and youth, especially adolescent girls. This will enable them to exercise autonomy and choice concerning their sexual and reproductive health and rights and well-being. SRH Serbia will support the strengthening of national development policies and programmes in order to enable access to quality comprehensive sexuality education. This will empower youth to access integrated sexual and reproductive health services, including HIV and gender-based violence services, in all contexts, including humanitarian and fragile contexts. This work will include teaching, teacher training, the development of curricula, and community engagement, including outreach to the most vulnerable adolescent girls, who are at high risk of unwanted pregnancies, sexual exploitation and abuse. SRH Serbia will also ensure that men and adolescent boys have opportunities, including through comprehensive sexuality education programmes, to challenge harmful notions of masculinity and promote gender equality.  SRH Serbia will promote and support the fundamental right of young people to participate in civil and political life. This will empower them to play a vital role in their own development and in that of their communities. This will be achieved by supporting local, youth-led initiatives and organizations that promote the equal participation of diverse young men and women, including those from vulnerable groups. |

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| **Objective 2.2. Engage media and opinion leaders in promoting SRHR with the aim to influence key decision makers** |
| In the past years, Serbia is facing its ongoing decline in media freedom. The conditions for practising professional journalism have been degraded for years and the Serbian media sector has faced numerous challenges, including political control over the mainstream media, low financial sustainability of media outlets and related high dependence on state funding, as well as a lack of transparency of that funding. All these factors lead to a general state of censorship and self-censorship in the media in Serbia especially when it comes to SRHR and gender topics.  SRH Serbia will continue building a collaborative partnership with liberal and investigating media representatives and key opinion makers in Serbia, to scaling up their knowledge about SRHR topics as well as gender-sensitive reporting. SRH Serbia will promote SRHR through social media and traditional channels using prominent opinion leaders as key figures to support SRHR programmes.  By 2025 SRH Serbia will have a meaningful ongoing partnership with key representatives from the biggest and the most influential Media Agencies at national and local level, as well as with key opinion leaders who will spread the messages that affect behavioural change and attitudes in the field of use and access in sexual and reproductive health services, respect for human rights and gender equality. |
| **OUTCOME 3**  **Full spectrum of sexual and reproductive health services offered and provided in Serbia** |
| **Objective 3.1: Enable SRHR services delivery through public health institutions in Serbia** |
| By ensuring access to a wide range of SRHR services contributes to better outcomes of health for all. This also ensures the right to choose as an individual right of each person. Access to the initial services is often limited which causes a lot of negative consequences. We need to ensure access to the services that are available for all, that services are right – based, youth-friendly and gender-sensitive and that is provided by high level sensitised medical professionals. Education is a life-long process for every individual as well as for organizations and institutions and even for larger systems such as networks. Interventions must therefore always include the creation of an environment that enables and supports institutional learning, which will in turn again create ownership and thus sustainability. Building human capacity is the only way to ensure the sustainability of outcomes and thus create real impact.  SRH Serbia will support the delivery of SRHR services in the basic health-care facilities at national and local levels, through functioning health systems that prioritize quality, equity and integration and are equipped with accountability mechanisms for users and providers. The SRH package should universally include family planning services; abortion-related services,emergency obstetric care and post-abortion care; STI and HIV prevention and management prevention of SGBV. SRH Serbia will support the integration of HIV and SRHR services since it matters enormously from a user’s perspective. This provides them with an opportunity to deal with the health-care system as one, in testing its quality and in feeling supported. It helps to determine the extent to which users trust the system and its value in resolving their problems, which, in turn, will determine the continuity of use.SRH Serbia will support comprehensive SRH education and a package of social protection services for adolescents and youth, including SRH. At a minimum, these will include life skills education, sexuality, psychosocial counselling, contraception, HIV-prevention, STI- prevention/ treatment and maternal health services;  SRH Serbia will be focused on the creation of sustainable partnerships with relevant public and private institutions to ensure systemic/institutional strengthening and the creation of a referral system as a “bridge” between community-based services and institutions. SRH Serbia will invest efforts to raise the capacity and knowledge of medical professionals to became skilled to provide comprehensive services as well to facilitate access to the services when is needed. SRH Serbia will champion broad multi-stakeholder partnerships to provide high-quality services that reach everyone, including the most vulnerable.  By 2025 in Serbia will be developed a wide range of SRHR services available for all and provided by trained, highly professional staff who are sensitized and specialized for the area of SRHR. The number of marginalized groups who demand and benefit from SRHR services will increase. |
| **Objective 3.2: Increase delivering SRHR rights - related services in MA practice** |
| Access to the rights-based services is often limited or there is a lot of barriers to accessing the services. Marginalized groups are faced with a lot of gaps that prevent them to exercise their rights. In general, it is crucial to create a right-based service that is beneficiaries-oriented and to correspond to real needs taking into account the use of gender-sensitive procedures.  SRH Serbia will continue its' work in enabling right-based and people-centered services through Drop-in the center, Youth counseling center. Considering the fact that health care is increasingly being delivered through digital channels such as the internet, mobile phone messaging, social media, apps, voice, video messaging, and telemedicine, SRH Serbia will enable access to SRHR and SGBV/GBV services using the relevant counseling services platforms.  SRH Serbia will implement programs to promote increased demand, access and delivery of SRHR services. Emphasis will be placed on the greater availability of youth-friendly SRH information and services, through schools, health facilities and outreach activities. Another area of focus is sexual and gender-based violence (SGBV) and harmful practices such as early marriages. A particular focus will be the integration of SGBV programming into broader SRH services.  SRH Serbia will focus on strengthening partnerships and maintaining a referral system with relevant institutions to provide high-quality right-based services. Ensure building capacity of staff and manage outreach service will also contribute to increasing the number of underserved, poor, and marginalized people who have access to SRHR right – based services including safe abortion and HIV services.  By 2025 SRH Serbia will increase the number of beneficiaries of right-based services (both online and face to face) especially those who are marginalized or/and young people. The range of offered SRHR right–based services also will expand. |

|  |
| --- |
| **OUTCOME 4**  **High level performing and accountable MA** |
| **Objective 4.1: Expand network of SRHR volunteers to advocate for SRHR** |
| Volunteers are critical partners and participants in society that have an enormous impact on the SRHR and well-being of communities. Being a volunteer was something rather new for this generations, as well as sexual education, youth rights and the concept of participation. Young people as agents of change play an instrumental role in advocating for SRHR. Youth need to be able to explore their own sexuality, and to be informed to make right decisions related to sexual and reproductive health and rights. Volunteers networks are crucial in spreading knowledge and experience related to the SRHR and raising awareness among youth.  SRH Serbia will invest in empowerment of youth people to take active role in advocating for SRHR as human rights. SRH Serbia will focus on development and implementation of volunteers programmes for increasing capacity and knowledge among youth to be able to exercise their sexual and reproductive rights.  By 2025 SRH Serbia will expand its volunteer network. Young volunteers will act as activist and change maker in supporting and promoting SRHR values and achieving participation in policy changes. SRHR volunteer programmes will attract new members who are ready to act for better future in the area of SRHR. |
| **Objective 4.2: Enhance organizational effectiveness and resource mobilization management** |
| Organizational development and effectiveness are crucial for the creation of a sustainable vision for achieving the mission to which we are committed, as well as to contribute to the Federation Strategic Framework as an accountable and sustainable MA.On the other side resource mobilization for SRHR programmes is crucial for providing sustainability of SRHR programmes and to stay accountable to the populations with whom we work by providing them with the services that are available to them at any time.  SRH Serbia will focus on ongoing resource mobilization to increase resources for SRHR programmes; build the capacity of staff for effective and result-based work; develop and maintain resource mobilization procedures, and advance financial management to ensure accountability at all levels. SRH Serbia will build on progress in programming; the management of resources; system-wide results, coordination and coherence; and communication, resource mobilization and partnerships to further strengthen its organizational effectiveness and efficiency.  SRH Serbia will increase its efforts to improve results-based management by capitalizing on information and communication technologies and by applying better business analytics. It will continue to mainstream results-based management in its policies, procedures, manuals and systems. Results-based management will be a core skill of all programme and operations staff. To improve the quality of its programmes, SRH Serbia will invest in the development of theories of change; document and use good practices and lessons learned, and plan and implement the new MEL framework.  SRH Serbia uses results-based management to manage the full cycle of programmes, from planning, monitoring and reporting, to evaluation. Learning is embedded in each stage of the cycle, including learning from evaluative evidence to improve programme design and implementation. The Evaluation Office will continue to foster evidence-based learning and programme development and will conduct high-quality evaluations to inform management actions.  SRH Serbia advocates flexible and predictable funding through multi-year pledges, commitments and co partnership-building capacities to identify opportunities for resource mobilization from non-traditional donors, including the private sector.  By 2025 SRHR Serbia will advance funding for the sustainability of SRHR programmes and increase the capacity of human resources to support accountable and valuable responses in the human rights mission in which we believe. |

## MONITORING AND EVALUATION

SRH Serbia will monitor the results of the strategic plan at the output, outcome and impact levels, and its organizational effectiveness and efficiency result at the output level. Results framework aligned with the strategic plan will be required for each programme that SRH Serbia develops under this strategic plan (List of SRH Serbia programmatic areas is provided in Annex 4).

SRH Serbia will monitor and report the results at the programme output level annually. SRH Serbia will apply real-time monitoring where applicable to monitor the progress towards output targets, critical assumptions and risks.

SRH Serbia will prioritize evaluations and quantitative and qualitative analyses to learn from the implementation of the strategic plan and inform the strategic decision-making process.

SRH Serbia will strengthen the communication of results at all organizational levels to mobilize support from a range of partners, in order to ensure sustained and predictable resources, transparency of the organizations Serbia will conduct a midterm review of the strategic plan, including the resource allocation system.

## IMPLEMENTATION STRATEGIES

Following table shows analytically how SRH Serbia intends to implement its Strategic plan

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Strategic Outcomes** | Outcome 1: The Republic of Serbia’s institutions respect, protect and fulfil sexual and reproductive rights and gender equality. | | | Outcome 2: People in Serbia act freely on their sexual and reproductive health and rights | | Outcome 3: Full spectrum of sexual and reproductive health services offered and provided in Serbia | | Outcome 4:. High level performing and accountable MA | |
| **Objectives** | Obj. 1.1:  To enhance national and local decision makers’ knowledge and capacities to adopt SRHR legislation, including implementation, budgeting and monitoring mechanisms | | Obj. 1.2:  Mobilize and strengthen women groups and youth NGOs to advocate for SRHR related legislation, sustain strategies and laws in the area of gender equality | Obj. 2.1:  Empower youth in Serbia to access comprehensive sexuality education and and realize their rights | Obj.2.2  Engage media and opinion leaders in promoting SRHR with the aim to influence key decision makers | Obj. 3.1  Enable SRHR services delivery through public health institutions in Serbia | Obj.3.2  Increase delivering SRHR rights - related services in MA practice | Obj. 4.1:  Expand network of SRHR volunteers to advocate for SRHR | Obj. 4.2:  Enhance organizational effectiveness and resource mobilization management |
| **Priority Activities** | * Engage the All-Party Parliamentary Group (APPG) to advocate for SRHR legislative changes, particularly using the opportunities provided by the European Parliamentary Forum (EPF) * Build alliances with the international organisations, particularly the UN and EU, to advocate for the implementation of ratified international agreements (e.g. the SDGs,ICPD) * Collaborate with Human Rights regulatory bodies to issue recommendations to the government on SRHR commitments * Influence the key ministries in charge of SRHR legislation to prioritise SRHR in budget allocation and to develop M&E mechanisms with CSO involvement * Ensure commitment of national authorities to create accountability mechanisms in the SDG implementation process with CSO participation. * Coordinate efforts between the ministry of public administration and the local administrations to reinforce commitment to SRHR at local level, including budgeting and M&E mechanisms * Engage the standing conference on towns and municipalities (with mayors and local MPs) in prioritising SRHR issues including the use of good practices piloted with CSO * Develop collaborations with municipal health councils including for budget allocation and M&E mechanisms for SRHR legislation  1. Enhance collaboration between Vojvodina provincial secretariats to reinforce efforts in SRHR an to feed their experience into the national level  * Influence the network of Institutes for Public Health to support local level activities related to SRHR * Use the collaboration with Serbian-based donors to reinforce the local authorities’ commitment to legislation and funding for SRHR * Establish cooperation with the local networks of Ombudsman to strengthen M&E mechanisms on human rights issues | | * Expand the existing NGOs network to include local level and other national women groups and youth NGOs and agree a common agenda for advocacy, including joint actions around specific events and opportunities using the opportunities provided by the EU accession processes * Explore and develop strong evidence-based arguments in coordination with women groups and youth NGOs to address challenges related to sensitive topics such as infertility, surrogacy, migrants, IVF or to anti-choice groups * Build the capacity of women groups and NGOs in advocacy and in their participation in decision making processes related to SRHR and gender issues, including in monitoring international commitments * Support the creation of informal local expert groups made of representatives from women groups and youth NGOs, civil servants and other relevant stakeholders to coordinate local advocacy efforts, collect good practices and ensure their replication in other parts of the country through networking. | * Advocate for inclusion of CSE into educational system * Peer education * Capacity building of professors to provide CSE in schools * Engage young people as champions to advocate to SRHR of youth * Building capacity of youth to raise awareness and communicate their sexual health and rights * CSE peer education * Enabling virtual CSE education modules | * Engage the media and opinion leaders in promoting SRHR * Explore all relevant informal channels to influence key decision makers at national and local levels * Framing SRHR narratives on social networks and other online channels | * Organise periodical meetings with relevant institutions * Create the CME program(Develop the modules) * Strengthen capacity of medical professionals to provide qualitative SRHR services * Organize trainings for CME on SRHR * Strengthening the existing referral networks | * Strengthen partnership for provision of right-based services * Create referral system * Organize SRHR outreach teams * Provide right-based counselling services including safe abortion, contraception and HiV counselling * Provision of online counselling services on contraception | * Create programmes for attract new volunteers * Organize volunteers’ trainings/programmes for building capacities for advocating for SRHR and raise awareness among youth | * Train SRH Serbia’s staff in application of monitoring procedures * Create system for advancement of finance management * Develop resource mobilization system * Train human resource for supporting resource mobilization process |
| **Models of programming[[1]](#footnote-1)** | Public advocacy and work with public institutions at national and local level | | Work with society organisations on capacity building for SRHR advocacy | Public advocacy and work with public institution. Capacity building of youth for CSE | Public advocacy and work with mass media and opinion leaders to deliver SRHR messages | Work with public health institutions (public advocacy) for integration of SRHR services | Work with public institutions and community for gender sensitive SRHR services | Capacity building | Capacity building and financial sustainability |
| **Target groups** | Members of parliament, regulatory bodies protecting human rights, key ministries  Local level government representatives, local level regulatory bodies | | Civil society organisations working in health and human rights, organisations of women/ people living with disabilities | Youth (pupils, students) and institutions, volunteers | Media | Professionals in institutions, beneficiaries | Professionals in institutions, beneficiaries, SRH volunteers | SRH Serbia, volunteers | SRH Serbia, volunteers |
| **Geographical focus** |  |
| **What will we stop / reduce to implement this strategy?** |  |
| **Organisational implications?** |  |
| **High level budget** |  |

## STRATEGIC MEASUREMENT

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Outcome /Objective** | **Indicators** | **Targets (expected results)** | | | | | | | | | |
| b/line | | Yr 1 | | Yr 2 | Yr 3 | | Yr 4 | | Yr 5 |
| **Outcome 1:** The Republic of Serbia’s institutions respect, protect and fulfil sexual and reproductive rights and gender equality/  **Objective 1.1:** To enhance national and local decision makers’ knowledge and capacities to adopt SRHR legislation, including implementation, budgeting and monitoring mechanisms | Impact:  **Outcome indicator 1:** Action plan of the National programme for preservation and improvement of sexual and reproductive health and rights of citizens of the Republic of Serbia is fully implemented by the Government of Serbia | The Action plan is drafted and waiting for approval | | The Government and the Ministry of health started with its’ implementation | | Allocated at least 15.000 euros for SRHR activities under the Action plan | Allocated at least 15.000 euros for SRHR activities under the Action plan | | Allocated at least 20.000 euros for SRHR activities under the Action plan | | Allocated at least 20.000 euros for SRHR activities under the Action plan |
| **Progress indicator 1:** Assembly meeting related to adoption of SRHR National programme organized | N/A | | SRHR National programme adopted | |  |  | |  | |  |
| **Influence indicator 1:** SRH Serbia participated in the meeting with MoH and pushed for adoption of SRHR National programmew | N/A | | Organized meetings with MoH | | Organized meetings with MoH | Organized meetings with MoH | | Organized meetings with MoH | | Organized meetings with MoH |
| **Outcome indicator 2:** SRHR national framework faligned with ratified international commitments related to SDGs, ICPD and Istanbul Convention | Ratified international commitments are not a part of Serbian national legal framework | | ICPD commitments fully integrated into national legal framework | | SDGs targets for goals 3  fully integrated into national legal framework | SDGs targets for goals 5  fully integrated into national legal framework | | Istanbul convention fully integrate into national framework | |  |
| **Progress indicator 2:** No. of meetings of working groups for integration of international commitments into Serbian legislation organized |  | |  | |  |  | |  | |  |
|  | **Influence indicator 2:** Representatives from SRH Serbia have been included in the Working groups related to work on the mentioned documents. |  | |  | |  |  | |  | |  |
| **Outcome 1:** The Republic of Serbia’s institutions respect, protect and fulfil sexual and reproductive rights and gender equality/  **Objective 1.2** Mobilize and strengthen women and youth NGOs to actively and in coordinated way advocate for SRHR related legislation, budgeting and monitoring both the national and local level | **Outcome indicator 3:**  Local women and youth NGOs included in WGs for development of local legislation related to SRHR and gender | Local level legislation does not recognise specific needs and opportunities related to SRHR nor the capacity of the civil sector to support creation of better, more sensitive legislation | | 10 local NGOs participated in development of local legislation related to SRHR and gender issues | | 10 local NGOs participated in development of local legislation related to SRHR and gender issues | 10 local NGOs participated in development of local legislation related to SRHR and gender issues | | 10 local NGOs participated in development of local legislation related to SRHR and gender issues | | 10 local NGOs participated in development of local legislation related to SRHR and gender issues |
|  | **Progress indicator 3:** No Working groups for LAPs established | N/A | |  | |  |  | |  | |  |
|  | **Influence indicator 3:**  SRH Serbia increased capacity of local NGOs to participated in the work of Working groups for development of LAPs on SRHR and gender related issues |  | |  | |  |  | |  | |  |
|  | **Process:** | N/A | | Participation in the meetings and WG at national and local level, capacity building workshops for women and youth NGOs on advocacy | | Participation in the meetings and WG at national and local level | Participation in the meetings and WG at national and local level | | Participation in the meetings and WG at national and local level | | Participation in the meetings and WG at national and local level |
| **Outcome /Objective** | **Indicators** | **Targets (expected results)** | | | | | | | | | |
| b/line | | Yr 1 | | Yr 2 | Yr 3 | | Yr 4 | | Yr 5 |
| Outcome 2: People in Serbia act freely on their sexual and reproductive health and rights/ **Objective 2.1:** Empower youth in Serbia to access comprehensive sexuality education and and realize their rights | Impact:  **Outcome indicator 4:**  Enabled environment for inclusion of CSE in Serbian educational system | CSE is not a part of Serbian educational system | | 5000 young people reached with CSE in school environment and out of school environment | | 5000 young people reached with CSE in school environment and out of school environment | 5000 young people reached with CSE in school environment and out of school environment | | 7 000 of young people reached with CSE in school environment and out of school environment | | 10 000 of young people reached with CSE in school environment |
| **Progress indicator 4:** Established collaboration with schools and local NGOS (signed MoUs when possible) on implementation of CSE programme |  | | 20 schools, 20 NGOs | | 20 schools, 20 NGOs | 20 schools, 20 NGOs | | 20 schools, 20 NGOs | | 20 schools, 20 NGOs |
| **Influence indicator:** No. of meetings with schools and NGOs related to provision of CSE education |  | | 40 meetings | | 40 meetings | 40 meetings | | 40 meetings | | 40 meetings |
| **Outcome 2:** People in Serbia act freely on their sexual and reproductive health and rights/  **Objective 2.2**. Engage media and opinion leaders in promoting SRHR with the aim to influence key decision makers | Impact:  **Outcome indicator 4:**  Favorable public opinion/perception on SRHR and gender issues  **Progress indicator 4:**  Media representatives and opinion leaders support SRHR programmes and spreading positive SRHR messages  **Influence indicator:** Established collaboration with relevant media in country |  | | 10 000 YP reached with positive SRHR/CSE messages | | 10 000 YP reached with positive SRHR/CSE messages | 10 000 YP reached with positive SRHR/CSE messages | | 20 000 YP reached with positive SRHR/CSE messages | | 20 000 YP reached with positive SRHR/CSE messages |
|  | Process: | N/A | | Meetings, workshops | | Meetings, workshops | Meetings, workshops | | Meetings, workshops | | Meetings, workshops |
| **Outcome /Objective** | **Indicators** | **Targets (expected results)** | | | | | | | | | |
| b/line | | Yr 1 | | Yr 2 | Yr 3 | | Yr 4 | | Yr 5 |
| **Outcome 3:** Full spectrum of sexual and reproductive health services offered and provided in Serbia  **Objective 3.1:** Enable SRHR services delivery through public health institutions in Serbia | Impact:  **Outcome indicator 5:**  Beneficiaries in Serbia state in structured annual interviews that services are delivered as quality integrated  **Progress indicator**  Number of SRH services provided.  **Influence indicator**  Number of SRH services provided to young people under 25 years (as a % of all services provided).  Number of abortion-related services provided.  Number of HIV-related services provided.  Number of contraception services provided | Lack of CME programmes on SRHR  No access to youth friendly services in primary health institutions | | Virtual CME programme on SRHR launched | | 200 medical professionals reached by SRH Serbia CME programme | Improved quality of SRHR services in primary health institutions | | Improved quality of SRHR services in primary health institutions | | Enabled youth-friendly services through primary health institutions |
| **Outcome 3:** Full spectrum of sexual and reproductive health services offered and provided in Serbia  **Objective 3.2:** Increase delivering SRHR rights - related services in MA practice | Impact:  **Outcome indicator 5:**  70% of beneficiaries reached with MA SRHR services  **Progress indicator**  Number of services provided  **Influence indicator**  Number of SRH services provided to young people under 25 years (as a % of all services provided). | A lack of comprehensive gender-sensitive procedures within the institutions delivering the sexual and reproductive rights-related services. | | 5000 MA SRHR services and referrals provided  5000 beneficiaries reached by MA services | | 5000 MA SRHR services and referrals provided  500 beneficiaries reached by MA services | 5000 MA SRHR services and referrals provided  6000 beneficiaries reached by MA services | | 5000 MA SRHR services and referrals provided  7000 beneficiaries reached by MA services | | 5000 MA SRHR services and referrals provided  10 000 beneficiaries reached by MA services |
|  | Process: |  | | Provision of services, trainings and education, development of CME module | | Provision of services, trainings and education, | Provision of services, trainings and education, | | Provision of services, trainings and education, | | Provision of services, trainings and education, |
| **Outcome /Objective** | **Indicators** | **Targets (expected results)** | | | | | | | | | |
| b/line | | Yr 1 | | Yr 2 | Yr 3 | | Yr 4 | | Yr 5 |
| Outcome 4: High level performing and accountable MA/ Objective 4.1: Expand network of SRHR volunteers to advocate for SRHR | Impact:  **Outcome indicator 6:**  Accountability mechanism created, improved resource mobilization system and increased staff productivity.  **Progress indicator**  Increased organizational funding  **Influence indicator** | All SRH Serbia polices are in place | | MEL process increased | | Organizational policies, strategies and procedures improved | Number of financial resources increased | | Number of financial resources increased | | Number of financial resources increased |
| Process: | n/a | | n/a | | n/a | n/a | | n/a | | n/a |
|  |  |  | | | | | | | | | |
| Outcome 4: High level performing and accountable MA/ Objective/ Objective 4.2: Enhance organizational effectiveness and resource mobilization management | **Outcome indicator 7:** Increased number of youth engaged in SRHR topics  **Progress indicator**  Number of engaged volunteers  **Influence indicator** |  | Engaged 500 new volunteers | | Engaged 500 new volunteers | | | Engaged 500 new volunteers | | Engaged 500 new volunteers | |
|  | **Process** |  |  | |  | | |  | |  | |

## RISK MANAGEMENT

An effective risk management framework is required to address risks to achieving the results of the strategic plan. External risk factors include

(a) a changing international assistance environment, with limited core resources and increased competition for funding.

(b) a political landscape with growing opposition towards sexual and reproductive health and reproductive rights.

(c) many humanitarian and crisis situations that undermine development gains and that are characterized by the neglect of maternal and reproductive health needs and gender-based violence.

SRH Serbia will address these challenges through innovative approaches for resource mobilization; enhanced partnerships; the improved use of communications, including the use of social media; and by playing a leading role in the prevention of and response to gender-based violence and the provision of sexual and reproductive health services in humanitarian settings.

SRH Serbia will deploy mitigation measures such as:

(a) developing timely change-management plans.

(b) updating institutional guidance.

(c) maintaining strong controls.

(d) strengthening the results-based management system, including monitoring and evaluation and business analytics.

(e) maintaining capable and motivated human resources.

SRH Serbia will continuously review its organizational risk management system to introduce change, leverage existing resources and integrate lessons learned.

## Annex 1

## Stakeholder analysis

|  |  |  |  |
| --- | --- | --- | --- |
| **Government institutions** | **NGOs** | **International organizations, donors** | **Private sector** |
| 1.Ministry of health  2.Ministry of local administration and local self-governance  3.Commessariat for refugees and migration  4.Ministry of interior  5. City center for social welfare  6. Statistical office of Republic of Serbia  7. Local governments (municipalities)  8. Commissioner for protection of Equality  9. Local health center  10.Local health mediators  11. National employment agency  12.Center for protection of victims of human trafficking  13.Institute for public health Palmoticeva  14. Institute for social services  15.Institute for mother and child  16.Gynechology hospital Visegradska  17.Ministry of Education (Institute for improvement of education)  18.Schools  19. Institute for public health  20. Provincial Secretariat for sport and youth  21. Provincial Secretariat for health  22. Faculty of medicine | 1.Roma Association Zajecar  2.Roma women organization Bibija  3. Regional Youth center – ROC  4. NGO Ternipe  5. Alternative center for girls  6. IPAK Center  7. Center for alternative politics  8. REAB  9.NGO Gipsy soul  10. Group Izadji  11. NGO In progress  12. NGO Stablo  13.Youth groups  14.Youth networks  15. Women groups | 1.Red cross  2.UNFPA  3.UN Women  4.UNDP  5.EU Delegation  6.GIZ  7.ViiV healtcare  8. IPAS  9.IPPF MAs  10.CDC Swiss  11.Embasies  12.European Parliamentary forum - EPF | 1. MERCK |

## Annex 2

## PESTLE ANALYSIS

|  |  |  |
| --- | --- | --- |
| **POLITICAL**   * Gender disparity * Gender quotas without real political influence * Growing opposition to SRHR * Pronatalist government approach * Raising traditional values * Raising influence of Orthodox church in political decisions related to SRHR * Intensified hate speech * Absence of media freedom * Transition to “hybrid state” * Derogation of liberal intellectual elite * Manipulation of data at all levels * No space for social topics in public space * GONGO * Right- wing NGOs | **ECONOMIC**   * Poverty * No government budgets for SRHR programmes and activities * High unemployment rate for women, youth and vulnerable individuals * Average salary is not enough for raising children | **SOCIAL**   * Brain drain * Lack of educational opportunities for young people * EU skepticism |
| **TEHNOLOGICAL**   * Increased level of online activities * Lack of personal contact * Transition from real life environment to virtual environment | **LEGAL**   * No integration of international standards into national legal framework * Absence of implementation of ratified international commitments and treaties | ENVIRONMENTAL   * COVID 19 |

## Annex 3

## SWOT Analysis

|  |  |
| --- | --- |
| **STRENGHTS**   * Adaptability * Leadership in SRHR * Existing the organizational structure * International affiliation (IPPF membership) * Reliability * Expertise in SRHR | **WEAKNESS**   * Lack of qualified human resources on SRHR * Advocacy wise INGOs witin the country only account what is in their plans (no responsiveness on the real needs of NGOs) * Local NGOs have limited expertise |
| **OPPORTUNITIES**   * Catalyst of standards and quality for partnering NGOs * MEL network * Increased presence on international arena | **THREATS**   * NGOs becoming donor oriented * Shrinking the space for NGOs * Autocratic oriented government |

## Annex 4

## SRH Serbia Programatic areas

|  |  |  |  |
| --- | --- | --- | --- |
| **ADVOCACY** | **YOUTH** | **ACCESS TO SERVICES AND INFORMATION** | **ORGANIZATIONAL LEARNING** |
| Framing SRHR narratives (OUTCOME 1) | Comprehensive sexuality education (OUTCOME 2) | SGBV/GBV (OUTCOMES 1,2and 3) | Monitoring&Evaluation&Learning(OUTCOME4) |
| Advancement of SRHR Agenda at national and local levels (OUTCOME 1) | Youth involvement OUTCOES 2,3 and 4) | Adverse effects of Trafficking in human beings on SRHR (OUTCOME 2 and 3)  Right-based approach (OUTCOME 2 and 3) | Resource mobilization (OUTCOME 4)  Organizational structure, management and effectiveness (OUTCOME 4) |
| Reproductive rights are human rights (OUTCOME 1) |  |  | Young Volunteers(OUTCOME 4) |

1. Consider a snapshot of the different programmatic approaches to achieve the outcomes / objectives, e.g. static clinics/ outreach (mobile units, private practitioners, community based distributors0, CSE for in school, CSE for out of school etc. What models of programming will we utilise (for example, will we reach out using an integrated package of services through clinics, will we invest in social franchises, how will we maximise impact through CSE etc)? [↑](#footnote-ref-1)