



SHARING

OUR

STRENGTHS

PAI

ANNUAL REPORT 2021

PARTNERSHIPS

ADVOCACY

AND IMPACT



When Wude Adugna (left) applied for a job as a health promoter in Ethiopia, she didn't know about family planning. She received intensive training on methods as well as how to organize community meetings and talk to community members with diverse levels of knowledge and experience with family planning. (Photo by Sala Lewis for PAI)

Dear friends,

For nearly 60 years, PAI has been on a journey to ensure that everyone — no matter where they live, their economic status or the color of their skin — can realize their fundamental right to sexual and reproductive health.

We do this by amplifying evidence, experiences and our voices, so that U.S. policies and global actions do no harm. We also support and collaborate with partners around the world so they can speak truth to power in their own countries.

The progress and promise of the stories shared in our 2021 annual report demonstrate how PAI and our partners are mitigating threats, driving progress and sharing our strengths so that women, youth and at-risk communities can achieve and thrive.

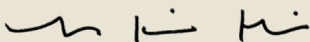
Our role as advocates — as truth seekers, truth speakers and defenders of sexual and reproductive health and rights — is more urgent than ever before. With the increase in teenage pregnancy and gender-based violence rates around the world, erosion of access to contraceptives during the COVID-19 crisis, threats to safe abortion access and more, our work and that of our fellow advocates is far from over.

We must ensure that our drumbeat remains strong, constant and clear, and the advocacy and policy wins PAI and our partners achieve reverberate across countries, communities and contexts.

With the support and encouragement of champions and supporters like you, we have both the courage to carry out our mission and the fortitude to achieve sexual and reproductive health and rights for all in our lifetime.

We are thinking bigger and bolder than ever before and are ready to usher in a new era of impact with partners around the world. We are excited about what we will accomplish in the years ahead and hope we can count on you to stand with us for what is to come.

In solidarity,

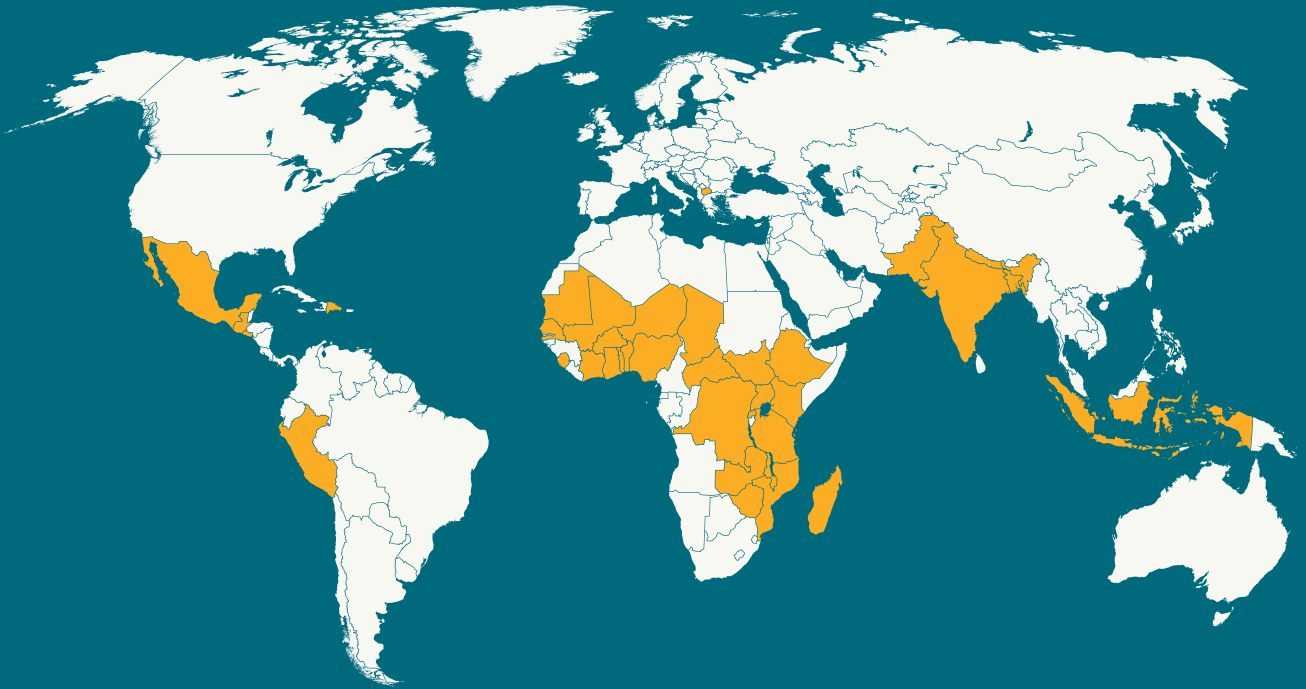


NABEEHA KAZI HUTCHINS
President and CEO, PAI



NEERAJA BHAVARAJU
Chair of the Board of Directors

— REACH



>> COUNTRIES

BANGLADESH
 BENIN
 BURKINA FASO
 CENTRAL AFRICAN
 REPUBLIC
 CHAD
 CÔTE D'IVOIRE
 DEMOCRATIC
 REPUBLIC OF CONGO
 DOMINICAN REPUBLIC

EL SALVADOR
 ETHIOPIA
 GHANA
 GUATEMALA
 INDIA
 INDONESIA
 KENYA
 MADAGASCAR
 MALAWI
 MALI

MAURITANIA
 MEXICO
 MOZAMBIQUE
 NEPAL
 NIGER
 NIGERIA
 NORTH
 MACEDONIA
 PAKISTAN
 PERU

RWANDA
 SENEGAL
 SIERRA LEONE
 SOUTH SUDAN
 TANZANIA
 TOGO
 UGANDA
 ZAMBIA
 ZIMBABWE

\$41,357

ON AVERAGE, PAI PROVIDED EACH PARTNER WITH \$41,357 IN FINANCIAL SUPPORT.

120

PARTNERS

SRHR

SEXUAL AND
REPRODUCTIVE
HEALTH AND RIGHTS

36

COUNTRIES

\$7.3M

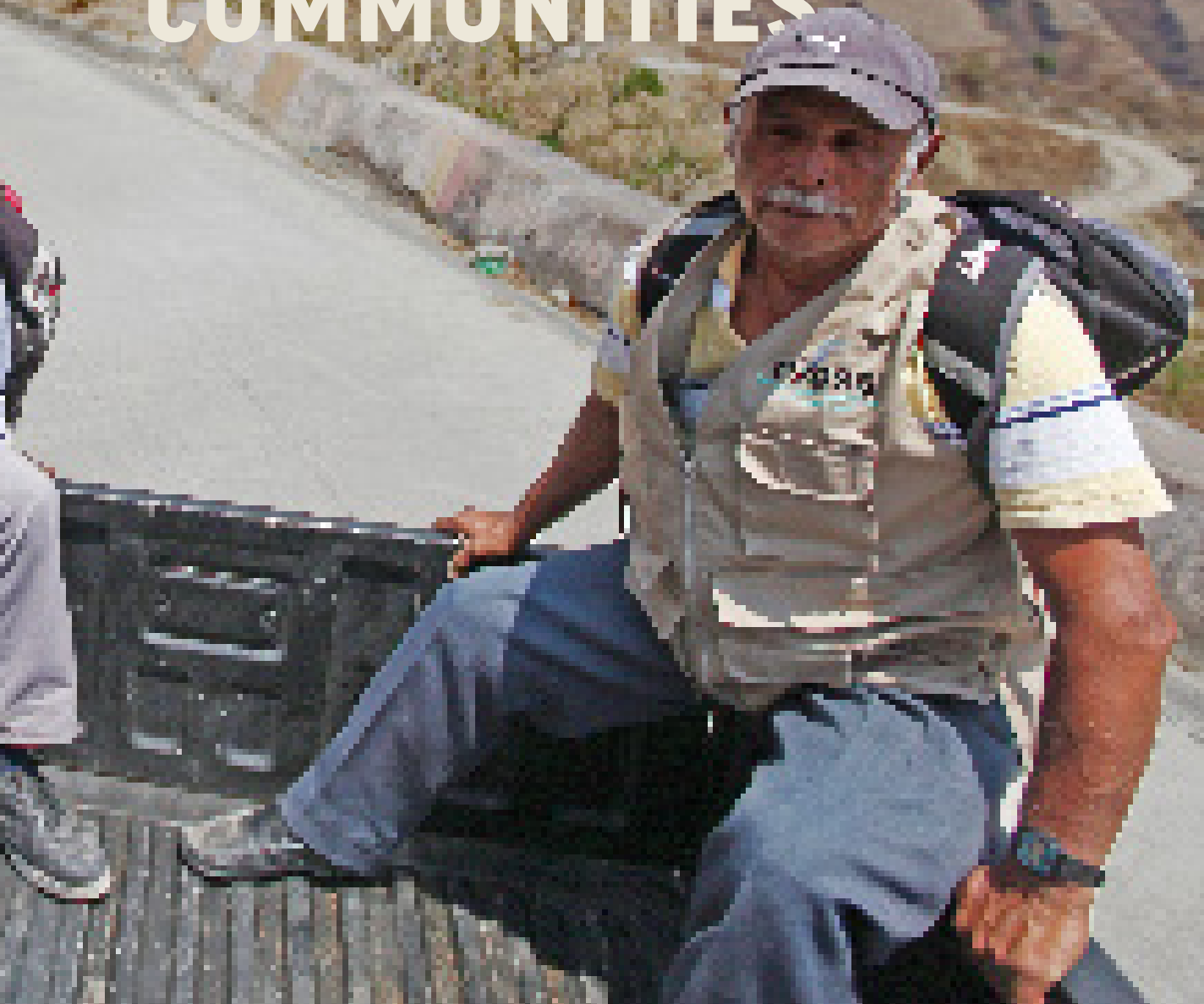
NEARLY \$7.3 MILLION IN FUNDING, ADVOCACY GUIDANCE AND TECHNICAL ASSISTANCE

PAI'S PARTNERS ARE BEST POSITIONED TO RESPOND



As volunteers with PAI partner Centro de Estudios para la Equidad y Gobernanza en los Sistemas de Salud's Community Health Defenders program, Eulalio Cruz, Vicente Godínez and Roel Ovall (left to right) often travel long distances to monitor the quality and availability of health care services and supplies in the Huehuetenango department, in the mountainous, western highlands of Guatemala. (Photo by Sandra Sebastian/No-Ficción)

TO URGENT NEEDS IN THEIR COMMUNITIES



MAKING THE CASE IN WASHINGTON, D.C.

The United States is, by far, the largest donor to global health programs worldwide. Whether this power helps or harms women, young people and communities across the globe depends on the decisions made by Congress, the presidential administration and federal agencies such as the U.S. Agency for International Development (USAID).

For nearly 60 years, PAI has led the charge to ensure that U.S. policy and funding support the rights and well-being of all, particularly when it comes to sexual and reproductive health. From documenting the harm caused by regressive and restrictive U.S. policies to our evidence-based advocacy on Capitol Hill, PAI is making the case for robust U.S. support of family planning and sexual and reproductive health programs.

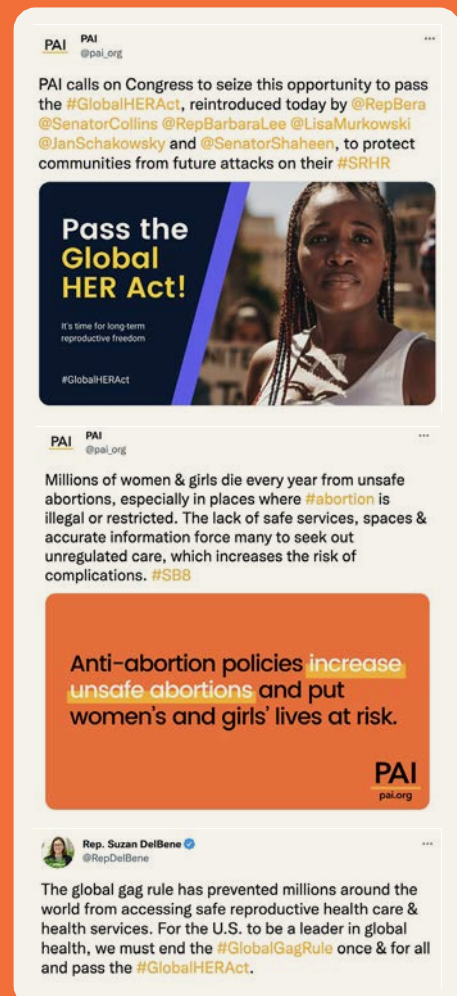
PAI leveraged our social media channels and created toolkits for congressional champions to amplify urgent calls to action on U.S. global funding and policy. We also spoke out against the record number of domestic anti-choice laws passed in 2021.

“There are high stockouts of family planning supplies in the hospitals across the country ... The impact has led to increased teenage pregnancies coupled with early marriages, HIV and sexually transmitted infections among youth. The organization has no reliable funding to support its operations.”

>> LAMECKS KIYARE

Executive Director, Youth Response for Social Change (YRSC) in Malawi

Country- and community-level insights from PAI's partners demonstrate the human impact of U.S. policy and investments and are critical to PAI's advocacy in Washington, D.C.



STRENGTHENING

U.S. POLICY & FUNDING

LOCATION
WASHINGTON, D.C.

ON JANUARY 20, 2021, Joe Biden was inaugurated as the 46th president of the United States, signaling the end of four years of hostile rhetoric, harmful policies like the Global Gag Rule (GGR) and incessant assaults on women's rights. There was reason to be optimistic, but we knew that this alone wouldn't guarantee progress for women, youth and other at-risk communities.

That's why PAI began working with the Biden-Harris transition team as soon as the election results were final, laying the groundwork for advancing our key priorities and for the incoming administration to unequivocally commit to protecting and expanding sexual and reproductive health and rights (SRHR).

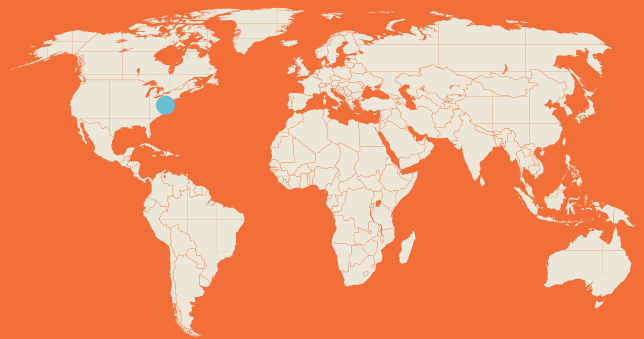
Within days of being sworn into office, President Biden signed an executive memorandum rescinding the GGR and restoring funding to the United Nations Population Fund (UNFPA). He also went on the record stating that SRHR, both domestically and internationally, would be a priority for this administration.

While these were welcomed steps, PAI's work was far from over.

Until the GGR is permanently repealed through legislation, it can and likely will be reinstated the next time a Republican president sits in the White House, which is why PAI continued to push for permanent repeal in 2021, approaching our advocacy from multiple angles.

We pursued passage of the Global Health, Rights and Empowerment (Global HER) Act, securing a record number of original co-sponsors of the bill, including several newly sworn-in freshman members of Congress.

We also worked with congressional champions to use the appropriations process — the funding bills that keep



the federal government running — as the vehicle to end the GGR once and for all. By the fall of 2021, we reached a significant milestone when, for the first time, language repealing the GGR was included in both the House and Senate appropriations bills for fiscal year 2022.

In addition to our work on GGR repeal, PAI led efforts to influence the Biden-Harris administration's newly formed National Strategy on Gender Equity and Equality. Several of the recommendations submitted by PAI were included in the final plan, including permanent GGR repeal, support for UNFPA funding and the prioritization of reproductive health in humanitarian crises.

Throughout the year, PAI's trusted analysis, country-level data and partner perspectives sent a loud and clear message to decision-makers in Washington, D.C., about the human impact that U.S. policy and funding decisions have on communities across the globe.

U.S. states passed a record number of anti-choice laws in 2021 — a stark reminder that bodily autonomy and health equity are still under constant attack. The erosion of these rights in the United States influences and impacts U.S. funding for global health programs and fuels the anti-choice movement abroad.

The threats to health and rights are as unrelenting as ever, which is why PAI's strong, steady advocacy in Washington, D.C., is so urgently needed.

BOLSTERING LOCALLY LED ADVOCACY

PAI partners best understand the context, urgent needs and opportunities to advance health and human rights in their countries and communities. Sustained investments in advocacy drive accountability, protect SRHR gains and propel a global movement fueled by local voices, experiences and leadership.

That's why PAI invests in partner-led advocacy initiatives to drive real, lasting change for women and young people. Partners work with PAI to identify what they need to achieve their goals, and we support these efforts by providing flexible funding, technical insights and strategic guidance to help them succeed.

“In advocacy spaces it's very rare that organizations have funding to support human chains on the streets, but PAI's flexible support enabled us to do this. The human chains made news and the news influenced the policy landscape in the country.”

>> SM SHAIKAT
Executive Director, SERAC

As part of its strategy, SERAC organized “human chains” in each of the eight administrative divisions of Bangladesh. These events brought together 500 adolescents and youth who sent a clear message to policymakers about the need for extended hours at Adolescent Friendly Health Centers. (Photo by SERAC)



STRENGTHENING

— **ADVOCACY**LOCATION
BANGLADESHPARTNER
SERAC

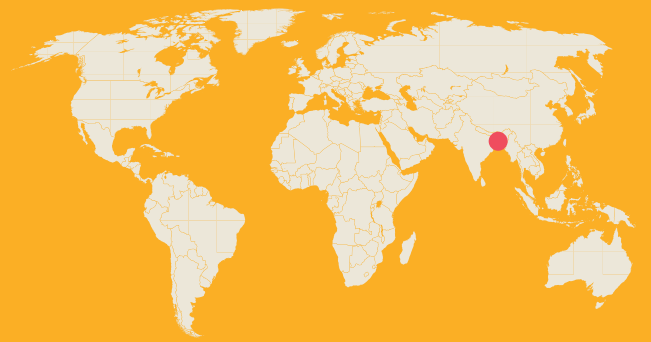
IN BANGLADESH, social stigma and cultural norms make it difficult for young people to even talk about their sexual and reproductive health, much less access the care they need.

In 2015, as part of its commitment to improving access to youth-friendly health services, the government of Bangladesh created Adolescent Friendly Health Centers throughout the country. But these centers were only open until 2 p.m., which meant that young people who were still in school were unable to take advantage of the services — including sexual and reproductive health care and information — specifically designed to address their unique needs.

SERAC-Bangladesh, a youth-focused rights and development organization, knew that if the centers were open later, more young people could access the services they need, such as menstrual health information, gender-based violence counseling, sexually transmitted infection screenings and more.

With financial and technical assistance from PAI, SERAC established a clear, achievable goal: to have the hours at the more than 1,100 youth-friendly health centers extended until 5 p.m. The organization developed a strategy that included launching social media campaigns, identifying and establishing relationships with key government decision-makers and mobilizing youth volunteers to make their voices heard.

While not everyone at the organization is an advocate, SERAC recognized that each team member had a role to play. Staff asked PAI to conduct a training webinar on targeted advocacy strategies and activities,



which helped them better understand how their work — whether in finance, fundraising or programs — was linked to improving access to youth-friendly health services.

With the support of the entire organization, SERAC achieved a major win in 2019 when the health center hours were extended by 90 minutes. Sustained by this progress, SERAC continued to work toward its ultimate goal of a 5 p.m. close time.

The COVID-19 pandemic and related lockdowns forced SERAC to pause its in-person advocacy activities. PAI provided the organization with additional funding and guidance, including a virtual capacity-strengthening workshop, enabling SERAC to pivot to online outreach and maintain the momentum of its advocacy and relationship-building with policymakers.

In November 2021, SERAC's steady advocacy paid off when the government agreed to extend the Adolescent Friendly Health Centers' hours until 5 p.m., ensuring that more young people can access the care they need.

INVESTING IN ORGANIZATIONAL CAPACITY

PAI's 120 partners in 36 countries are expanding access to essential sexual and reproductive health services, advancing gender equality and transforming the lives of people in their communities. But these dedicated advocates are often severely underfunded, particularly when it comes to building and strengthening the capacity of their organizations.

PAI knows that without strong, well-resourced champions advocating for better policies and funding, we'll never achieve our shared goal of access to SRHR for all. That's why we invest in partners' long-term growth, providing flexible funding and guidance so they can hire staff, train volunteers and expand internal systems.

Youth volunteers engaged with first-year students during orientation week at the University of Zambia, sharing information about Copper Rose's programs and volunteer opportunities. (Photo by Copper Rose)



STRENGTHENING ADVOCATES

LOCATION
ZAMBIA

PARTNER
COPPER ROSE

WHILE STILL a university student in 2015, Dr. Natasha Salifyanji Kaoma and her friend Faith Kaoma decided to launch a nonprofit to help keep girls in school by providing access to menstrual health supplies. They held a door-to-door fundraiser on their school's campus and raised \$300 to purchase sanitary napkins for girls in a school near Lusaka.

In the years since, Copper Rose Zambia has expanded its reach in a big way, establishing itself as a key influencer in policy and budget decisions that impact the lives of Zambia's youth and building a network of young, passionate advocates ready to stand up for their rights.

PAI has worked with Copper Rose since 2017, providing steady, flexible funding, strategic guidance and peer-to-peer learning opportunities to support the organization's goal of expanding from community-level activism to advocacy at the regional and national levels.

This continued support has helped Copper Rose strengthen its internal capacity and strategically grow the organization. In 2021, it doubled the number of projects from three to six and became the only youth-led organization in Zambia to receive direct funding from USAID. To support its expanded programming, Copper Rose grew its staff from nine to 20, including hiring a full-time advocacy and communications officer to lead key SRHR initiatives.

"We cannot overemphasize how beneficial collaboration is and how important it is for us to learn from others. Being able to collaborate with other partners gave us an opportunity to learn from their best practices and some common mistakes we all make when implementing projects."

>> MICHELLE MALUNGA
Advocacy and Communications Officer, Copper Rose



All of this sets the organization up for greater impact but also comes with additional expenses, such as legal representation, information technology support and an internal audit. Thanks to the flexibility of PAI's funding, Copper Rose was able to cover the costs of these critical internal needs.

Funding isn't the only way that PAI has helped Copper Rose. Early in the partnership, we trained members of the Copper Rose team on the Specific, Measurable, Attainable, Relevant and Time-Bound (SMART) approach — a systematic advocacy method that PAI has propelled that hones clear, achievable objectives and enables the development of strategies to reach them.

Since then, Copper Rose has used SMART across its advocacy work and regularly trains new staff and volunteers on how to advocate for important policy and funding changes. In 2021, in the Mazabuka and Petauke districts, SMART advocacy training was deployed to help peer educators and traditional and community leaders, such as teachers and religious leaders, understand their roles in driving and sustaining change in their communities. Thanks to their collective efforts and strategic advocacy, three health facilities in these districts are now offering abortion and other sexual and reproductive health services, impacting the lives of more than 20,000 young people.

Copper Rose has big plans for its future growth, and PAI looks forward to continued partnership and impact in Zambia.

EMPOWERING SOCIAL ACCOUNTABILITY

Everyday PAI and our partners fight for expanded access to essential health care, including sexual and reproductive health services. But access alone isn't enough: Services must be equitable, culturally sensitive and tailored to local needs.

Citizen monitoring is an important step in providing oversight and ensuring that public health clinics and providers are meeting the pressing needs of the communities they serve. That's why PAI works with our partners to fund and strengthen their accountability initiatives.

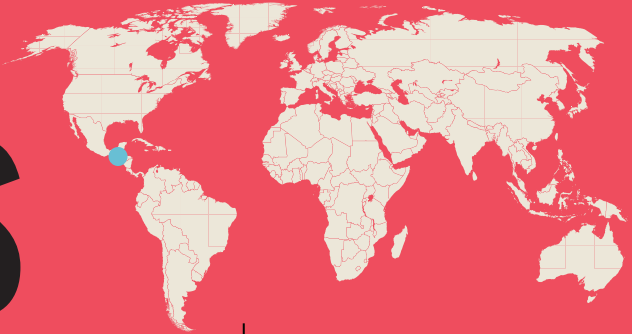
“We learned that participating in the monitoring of public services is our right, but we must exercise that right and participate in the decision-making. We must be responsible citizens.”

>> A COMMUNITY HEALTH DEFENDER, CEGSS



Graduates of the Community Health Defenders' first hybrid training course from the Sololá province display their certificates of completion at an outdoor graduation ceremony. (Photo by CEGSS)

STRENGTHENING — VOICES



LOCATION
GUATEMALA

PARTNER
CEGSS

STOCKOUTS OF MEDICINES. Mistreatment by doctors and nurses. Illegal charges for emergency transport. Limited and often irregular clinic hours.

These are just a few of the issues faced by Indigenous communities in Guatemala, where historic levels of institutionalized discrimination prevent them from equity in access to essential health services, including sexual and reproductive health care.

There are no formal systems in place for reporting violations, and few ways to hold public health care workers — and ultimately the government that is responsible for providing services — accountable.

Centro de Estudios para la Equidad y Gobernanza en los Sistemas de Salud (Center for Equity and Governance Studies in Health Systems, CEGSS) is fighting to change that by training and equipping Community Health Defenders — a network of citizen monitors who advocate for quality, dignified and equitable health care in Indigenous communities.

These defensores comunitarios (community defenders) travel to public clinics, hospitals and rural health care outposts in underserved, often hard-to-reach communities. There, they monitor whether facilities are open when they are supposed to be, the availability of medicines and other supplies and whether providers treat patients with compassion and respect.

During COVID-19 lockdowns, there were reports of increased violations of health rights in rural Indigenous areas of Guatemala. The need for defensores comunitarios was greater than ever, but COVID-19 made travel and in-person data collection difficult.

With support from PAI, CEGSS adapted its community-based monitoring and volunteer resources to a hybrid model. Short training videos were created and sent out every week via WhatsApp, covering topics such as human rights, the right to access health care during the pandemic and overcoming inequalities for Indigenous communities. Participants and facilitators would discuss what they had learned and share their own experiences through online chats and small group in-person meetings.

Of the more than 150 current monitors and new volunteers that signed up for the training, more than 90% completed the course. Thanks to CEGSS' online tools, this cohort of defensores comunitarios was ready to safely monitor essential health services, including reproductive, maternal and newborn care, in the pandemic.

This innovative approach has the potential to help communities well beyond the borders of Guatemala. CEGSS is sharing its knowledge and resources with fellow members of the Community of Practitioners on Accountability and Social Action in Health (COPASAH), a global coalition of over 400 health advocates spanning more than 40 countries.

PAI partners with each of the six steering committee members of COPASAH, including CEGSS, providing funding and guidance to support the organizations' community-centered accountability work and help build a broader movement for social accountability.

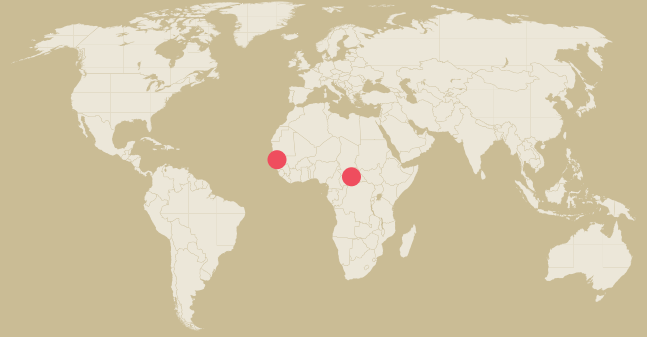
Together, we are strengthening a diverse and vibrant ecosystem of voices to advocate for the health and rights of all.

EXPANDING THE GLOBAL ECOSYSTEM

Solidarity in vision, diversity of voices and the sharing of power have defined the most successful movements for justice, equality and human rights. The global SRHR movement is no different.

PAI knows that achieving this mission requires a coordinated, highly engaged civil society network — comprised of advocacy organizations, community groups and other nongovernmental organizations — that know the local needs and are best positioned to advocate for positive change in their countries and communities.

That's why we bring together a bold and energized network of partners — 120 organizations across 36 countries and counting — and facilitate opportunities for them to exchange knowledge, collaborate on solutions and strengthen the ecosystem of SRHR champions that is driving positive, sustainable change for women, young people and communities around the world.



LOCATIONS

**CENTRAL AFRICAN REPUBLIC
SENEGAL**

PARTNERS

**AWLN-RCA
REPAOC**

Through the CSO GFF Hub, PAI provides funding and resources to help advocates hold governments accountable for delivering high-quality health care — including contraceptives — to women, youth and other at-risk communities. (Photo by PAI)



STRENGTHENING THE MOVEMENT

IN 2015, the World Bank introduced the Global Financing Facility for Women, Children and Adolescents (GFF) — a global partnership to improve reproductive, maternal, newborn, child and adolescent health and nutrition currently working in 36 countries.

Civil society organizations (CSOs) — including PAI partners — play a critical role in ensuring that the national governments that access funds and support from the GFF to advance national health priorities are accounting for the needs, challenges and desires of the very communities the GFF mechanism is meant to support.

PAI knew that to unleash the full potential of CSOs to advance these goals, they needed information and resources to help them better understand GFF processes and outcomes. Enter the Civil Society GFF Resource and Engagement Hub (CSO GFF Hub).

Launched by PAI in 2018, the CSO GFF Hub provides catalytic funding, technical assistance and an online resource library to help deepen civil society's engagement with the GFF. CSOs make the case for sustained domestic investments in sexual, reproductive, maternal, newborn, child and adolescent health and nutrition, holding governments accountable for the allocation of funding and delivering high-quality health care to women, youth and other at-risk communities.

The CSO GFF Hub also connects organizations through workshops and peer-to-peer learning exchanges, fostering a network of global advocates who push for greater accountability and can learn from one another's experiences and collaborate on solutions.

Based in Senegal, le Réseau des Plates formes Nationales d'ONG d'Afrique de l'Ouest et du Centre (the Network of National Platforms of NGOs in West and Central Africa, REPAOC) is a regional coalition

of African organizations working in the areas of health and human rights. With a grant from PAI, REPAOC developed a tool to guide advocates through the process of analyzing the cost and value of increased health investments.

In 2021, REPAOC gathered country-based coalitions from Burkina Faso, the Central African Republic, Côte d'Ivoire, Guinea and Niger, training participants on how to use the tool to conduct in-depth analysis and gather data that would strengthen their advocacy efforts.

The tool and training led to several advocacy wins for attendees, including Réseau des Femmes Leaders de Centrafrique (African Women Leaders Network — Central African Republic, AWLN-RCA), which secured a commitment from the Ministry of Health to fund the purchase of contraceptives.

Through the creation and expansion of the CSO GFF Hub, PAI is building an ecosystem of advocates working in GFF-focus countries who support one other by sharing knowledge, experiences and resources to advance goals and ensure the sustainability of the global SRHR movement.

The sharing of knowledge isn't a one-way street: These organizations, like all PAI partners, also provide us with critical insights. They guide our own U.S. and global advocacy, investment priorities, calls to action and the strategic direction of a coalition approach to improving the health and wellness outcomes of women, youth and at-risk communities.

By sharing our collective strengths, we are fueling a bold, diverse global movement to drive health, equity and prosperity for all.

— STRONGER

TOGETHER —

In the Mutasa district, health center committee (HCC) members share a light moment during a meeting at the Sakupwanya Clinic to discuss community concerns about the health care budget and quality of services. PAI partner the Community Working Group on Health (CWGH) supports HCCs throughout Zimbabwe, with the goal of mobilizing community participation around the right to equitable, high-quality health care. (Photo by Cynthia R. Matonhodze for PAI)



THROUGHOUT 2021, PAI and our network of global partners supported one another to advance the health and human rights of women, young people and at-risk communities and strengthen a bold, diverse global movement.

None of this would be possible without our donors and supporters sharing your strengths with us.

Thank you for propelling us and this mission forward. With you by our side, we won't stop fighting until SRHR are a reality for all.

FINANCIALS

This annual report gives us the opportunity to share how we use the resources provided by our donors to make our work possible. Accountability and transparency are important at PAI. We value the trust and commitment of our donors, and we strive every day to maximize the impact of your support.

STATEMENTS OF FINANCIAL POSITION

as of December 31, 2021 and 2020 (*in thousands*)

	<u>2021</u>	<u>2020</u>
ASSETS		
Cash and cash equivalents	\$ 3,357	\$ 3,991
Restricted cash	3,023	4,909
Investments	5,628	5,183
Service Contracts Receivable	347	87
Accounts receivable	17	18
Pledges receivable, net	5,932	11,808
Prepaid expenses and deposits	132	166
Property and equipment, net	391	490
Total assets	\$ 18,826	\$ 26,651
LIABILITIES AND NET ASSETS		
LIABILITIES:		
Accounts payable and accrued expenses	\$ 561	\$ 402
Grants payable	606	896
Deferred rent	555	604
Paycheck Protection Program loan payable	-	732
Total liabilities	1,722	2,634
NET ASSETS:		
Without donor restrictions		
Undesignated	3,107	1,852
Board designated	2,830	2,830
	5,938	4,682
With donor restrictions		
Perpetual in nature	157	157
Purpose restrictions	10,471	17,989
Time-restricted for future periods	538	1,190
	11,166	19,335
Total net assets	17,104	24,018
Total liabilities and net assets	\$ 18,826	\$ 26,651

Accounting standards require restricted grants that cover expenditures over multiple years to be recognized in the year they are received as grants and contributions with donor restriction. These net assets are then released from restriction as related program costs are incurred.

PAI is a 501(c)(3) nonprofit organization that promotes universal access to SRHR through research, advocacy and partnerships. Achieving this mission will dramatically

improve the health and autonomy of women, young people and at-risk communities, reduce poverty and strengthen civil society.

To receive the complete PAI 2021 Audited Financial Statements, please send your request to donations@pai.org or visit our website at www.pai.org/about/financials.

PAI Financial Statements were audited by Johnson Lambert LLP.

STATEMENTS OF ACTIVITIES

for the Years Ended December 31, 2021 and 2020 (in thousands)

	2021			2020
	WITHOUT DONOR RESTRICTIONS	WITH DONOR RESTRICTIONS	TOTAL	
SUPPORT AND REVENUE				
Grants and contributions	\$ 1,933	\$ 5,317	\$ 7,250	\$ 10,366
Service contracts	997	–	997	1,051
Investment income, net	92	–	92	122
Other	5	–	5	36
Gain on extinguishment of debt	732	–	732	–
Net assets released from restrictions	13,486	(13,486)	–	–
Total support and revenue	17,246	(8,169)	9,076	11,575
EXPENSES				
PROGRAM SERVICES:				
Supporting International SRHR Advocacy	10,375	–	10,375	8,769
Championing U.S. Government Support of SRHR	418	–	418	1,455
Incubating New Partnerships PHCPI	3,730	–	3,730	3,537
Total program services	14,523	–	14,523	13,761
SUPPORTING SERVICES:				
Fundraising	1,212	–	1,212	1,413
Management and general	610	–	610	674
Total supporting services	1,822	–	1,822	2,087
Total expenses	16,345	–	16,345	15,848
Change in net assets from operations	900	(8,169)	(7,269)	(4,273)
Change in fair value of investments	355	–	355	389
Change in net assets	1,255	(8,169)	(6,914)	(3,884)
Net assets, beginning of year	4,682	19,335	24,018	27,902
Net assets, end of year	\$ 5,938	\$ 11,166	\$ 17,104	\$ 24,018

LEADERSHIP

>> BOARD OF DIRECTORS

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Board Chair

ADA WILLIAMS PRINCE
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BARBARA CAMENS, J.D.

SHARON L. CAMP, PH.D.
(through June 2021)

PATRICIA FAIRFIELD, PH.D.

LUIS GUARDIA

SUJATA LAMBA

ELIZABETH LULE, PH.D.

TAMMY PALMER

JACKIE PAYNE, J.D.
(through June 2021)

MARI SIMONEN, PH.D.
(through Dec. 2021)

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POURU BHIWANDI, M.D.

SHARON L. CAMP, PH.D.

THE HONORABLE WILLIAM H. DRAPER III

THOMAS E. LOVEJOY, PH.D.
(deceased)

PHYLLIS TILSON PIOTROW, PH.D.

NAFIS SADIK, M.D.

>> EXECUTIVE LEADERSHIP TEAM

NABEEHA KAZI HUTCHINS
President and CEO

CYDNEY BUNN
Vice President of Human
Resources, Inclusion and
Operations

BERYL ISAAC
Chief Financial Officer

CARMEN MULLINS
Vice President of
Institutional Advancement

ELIANNE RAMOS
Senior Director of
Communications

At the Faizina Mosque in Rabai, Kenya, women gather for a discussion about family planning. PAI partner Kenya Muslim Youth Development Organization (KMYDO) facilitates trainings for Muslim leaders and discussions with service providers about Islamic support for family planning. (Photo by Allison Shelley for PAI)



PAI

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Cover:

With support from PAI partner Sahayog Society for Participatory Rural Development (SAHAYOG), accredited social health activist Shabnam Sheikh (center) was able to bring together girls in Lucknow, India, to discuss matters related to menstrual health, self-esteem, gender equality and other aspects of their sexual and reproductive health. (Photo by Sala Lewis for PAI)