

The background features several large, overlapping circles in various colors: a light blue circle at the top center, a bright pink circle at the top right, a large purple circle in the center-right containing the title, a yellow-orange circle at the bottom right, and a green circle at the bottom center.

# MONGOLIAN FAMILY WELFARE ASSOCIATION


2016-2022

**MONGOLIAN FAMILY WELFARE ASSOCIATION  
BECAME THE FIRST MONGOLIAN NGO GRANTED  
WITH UN ECOSOC SPECIAL CONSULTATIVE STATUS**



**MONGOLIAN  
FAMILY WELFARE  
ASSOCIATION**

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## FOREWORD

There is no doubt that Mongolian Family Welfare Association with its members, staff and supporters' effort with 22 years of experience in the field of Sexual and reproductive health has contributed greatly in successful implementation of 4th national reproductive health program, STI / HIV / national strategy to combat HIV-AIDS and national standard on abortion.

A total of 99,520 young people benefited from our educational sessions on SRH, sexuality and sexual rights while 243,870 people received comprehensive SRH services which has contributed accessibility of SRH services. Expansion of youth peer education network (Y-peer), roll out of new methods and approaches in IEC/ BCC interventions and clinics had been accredited meeting the national standards and started to provide one point services.

We became the first NGO in Mongolia granted with UN ECOSOC special consultative status.

MFWA has signed Memorandum of Understanding with international and national organizations such as Ministry of Health and "Urguu" maternity hospital, Regional Treatment and Diagnostic Center, China Family Planning Association, Safe Abortion Action Fund, International Contraceptive Association Foundation and JOICFP. By working closely with our partners, MFWA continue to expand our scope of work.

With MFWA staff, members, and volunteers, we developed our 2016-2022 strategic plan. The current MFWA strategic plan aligns well with IPPF's new strategic framework as well as the recently drafted Sustainable Development Goals.

In order to increase the number of SRHR services and information that we are able to deliver, MFWA has set its sights on diversifying its funding streams, mobilizing resource and generating income locally. Through a revitalized resource mobilization programming, we envision an MFWA who is independent, sustainable, and less reliant on external funding.

We would like to express our gratitude to our donors especially to the management team of the East & South East Asia and Oceania Regional Office of International Planned Parenthood Federation (IPPF-ESEAOR) for providing financial and technical assistance.

Our special thanks go to our staff, board members, community based distributors, youth volunteers, branch leaders and Dr Enkhjargal, RH consultant for their valuable and active contributions during the Strategic Planning exercise and wish all of you good health and success!

We urge our staff, members and volunteers to implement this strategic plan successfully.

Wishing you and your family good health, fortune and success!

Sincerely,

President, MFWA  
**B. Ganbold**

Executive director, MFWA  
**B. Munkhtsesteg**

# CURRENT SITUATION IN MONGOLIA

Total population of Mongolia in 2015 was 2,990,200 whereby 49% were male and 51% were female. Thirty percent of the population was below 15 years of age, 17% between the ages of 15-24 years, 18% between the ages of 25-35, 20% between the ages of 35-49 and 15% above the age of 50 years.

One in five of our population lives below the poverty line, living conditions are significantly different in urban and rural areas. However, at the national level, the Human Development Index (HDI) was 0,727 recorded in 90th among world's 188 countries and has joined high level of human development countries.

Gender Inequality Index is 0.325 and recorded 63rd among world's 155 countries and decrease of gender inequality index shows that women and men are involved equally in education and health services.

GDP per capita was \$1300 in 2006 and it increased to \$ 055 in 2014.

Mongolian health system has 3 stage system and there are 3244 public, private and mixed-owned health care organizations and 1006 outpatient clinics in Mongolia.

Mongolia has set targets to reduce child mortality, improve maternal health, fighting against HIV/AIDS, tuberculosis under Millennium Development Goals and child mortality is 15.3 deaths per 1,000 live births,

infant mortality rate was 10.2 per 1,000 live births, and sustainable reduction in maternal mortality 100 000 live births, 26.0 to be reduced by 7.6 times compared to 1990.

According to the World Bank and UN agencies survey in "Maternal mortality trends 1990-2015" Mongolia was one of 9 countries achieved maternal mortality target under Millennium Development Goals.

The adolescent birth rate in Mongolia is high, estimated at 40.462 per 1,000 (2013). The contraceptive prevalence rate (CPR) among married women declined from 69%



in 2003 to 54.6% in 2013. Unmet needs for family planning increased from 4.6% in 2003 to 16% in 2013 and is particularly high among women aged 15-19 (36.4%) and women living in urban areas of particular concern is the abortion rate, which was reported at 205 per 1,000 live births in 2013, a significant increase from 169 in 2008 (258.2 in urban areas and 129.8 in rural areas). Also notable are syphilis incidence rates which stand at 60.4 per 10,000 persons among young people aged 15-24 as compared to 32 per 10,000 persons among those aged 25-49.

A total of 210 HIV/AIDS cases were registered as of May 2016 and 79.8% (men having sex with men 48.4%, bisexual 29%, transgender 1.2%, heterosexual 21.2%) were males and 19.6% were females and 18.6% is between the ages of 15-24, 43.5% between the ages of 25-35 and rest 38% is above the age of 35 years.

MONGOLIA HAS SET TARGETS IN ITS SUSTAINABLE DEVELOPMENT GOALS 2030 IN SUPPORTING REPRODUCTIVE HEALTH SERVICES AND CARE, QUALITY OF SERVICE AND ACCESS TO REDUCE MATERNAL MORTALITY RATE TO 15 PER 100,000 LIVE BIRTHS AND UNDER-FIVE CHILD MORTALITY RATE TO 9 PER 1,000 LIVE BIRTHS, , 8 IN INFANT MORTALITY RATE PER 1,000 LIVE BIRTHS.

## CONCLUSIONS AND RECOMMENDATIONS OF FINAL EVALUATION OF STRATEGIC PLAN OF THE MFWA IMPLEMENTED DURING THE PERIOD OF 2011-2015

**1** The association has identified emerging issues and challenges on sexual reproductive health and rights in its implementation of the strategic plan for 2011-2015 and the goals and objectives and solving ways of this strategic plan was completely consistent with national and as well as IPPF policies, objectives and priorities.

**2** A total of 99,520 young people benefited from our educational sessions on SRH, sexuality and sexual rights while 243,870 people received SRH services which has contributed accessibility of SRH services between the period of 2011-2015.

**3** Expansion of youth peer education network (Y-peer), roll out of new methods and approaches in IEC/BCC interventions and clinics had been accredited meeting the national standards and started to provide one point services and majority of clients are clients who received services 2-4 times and it shows that there was adequate progress and improvement in quality of SRH information, knowledge and services and care.

**4** Advocacy to create positive changes in sexual and reproductive health policy and legislation in HIV/AIDS prevention law and fighting against pornography law with close cooperation of Members of Parliament and other CSOs and incorporation of sexual and reproductive health issue in crisis situation into the national disaster response plan shows that certain achievements were done under advocacy part.

**5** A considerable attention has been paid for increasing financial resources and capacity building for human resources, re-accredited by IPPF and has been playing an important role in civil society in health sector and it is north worthy.

# GENERAL RECOMMENDATIONS

**1 CONSIDERING THE CONTEXT CHANGES:** Today in Mongolia, all spheres have undergone rapid and intensive changes. To identify new strategy, the association should carefully scan internal and external environment, opportunities and risks, and assess own comparative advantages in the changing context.

**2 RANKING THE PRIORITIES:** Current strategic plan has some ambitious expectations to address broad issues with scarce resources, and identified some unrealistic general goals and objectives which were difficult to measure. Going forward, the association should consider the ranking of the priorities – focusing on most relevant and important issues, and set feasible, specific and measurable targets.

**3 REALISTIC TARGETING:** The organization with limited resources should consider that acting in “all provinces and cities of the country” likely will increase risks of inefficient use of limited resources and adverse affect on quality and result of activities. Thus, the association should review its target areas and target population to see they are appropriate to the association’s resources, and

make evidence-based choice for targeting. Scaling up of adolescent and youth interventions and FSW targeted programme would be more relevant and effective.

**4 MOVING TO STRATEGIC APPROACH AND SUSTAINABILITY:** Sustainability and funding of programme interventions are recognized as key concern for the organization’s success. Thus, the association should consider developing “exit strategy” and gradually decrease “donor dependence”, and ensure independent sustainable function. It is further recommended that sustainability of any project and synergy between project activities and organizational development should be considered since its planning phase. Implementation should not overreach, but rather focus on increasing demand for more strategic and effective approaches and scaling up “brand interventions and services”. Intensifying marketing/promotion of services and considering new strategic ways of working such as setting up social enterprises, use of social marketing, social franchising etc would be useful.

**5 COST EFFECTIVENESS:** Expansion of existing cost effective strategies such as community-based contraceptive

distribution through volunteers and reaching young people through Y-PEER clubs would be very useful. Doing this, it is important to improve management and sustainability of these strategies, and introduce other cost-effective interventions.

**6 IMPROVE CAPACITY TO USE BCC STRATEGIES:** The analysis of the research findings shows that in Mongolia, overall awareness among general public about SRH issues is relatively high. However, there is a big gap in “accurate knowledge” and “translating knowledge into practice”. Therefore, it is important to improve capacity in BCC strategies, and implementation of targeted BCC interventions rather than conducting mass general awareness raising information dissemination activities for general public.

**7 STRENGTHEN STRATEGIC PARTNERSHIPS:** It is important to develop organizational capability to become leader for advocating sexual and reproductive rights; and expand strategic partnerships and collaboration with relevant international and national organizations including private sector, educational institutions such as vocational technical schools, universities, as well as peer CSOs with common goals for SRH program implementation and resource mobilization.

# CONCLUSIONS AND RECOMMENDATIONS FROM SITUATIONAL ANALYSIS OF MERCADO MARKETING COMPANY



## CLIENTS SURVEY OF FAMILY CLINIC

"Family" clinic clients are aged 23-27 and they are satisfied with the services received. They receive about Family clinic information mainly from association's outside address and banner, family and relatives.

**Information:** Improving the clinic's outside environment and its address banner, placing comprehensive information showing types of services inside and improve knowledge and information about services among medical staff

**Service standard:** Improving client welcoming service as well as organization and coordination of services and develop service standard to maximize the time and speed of service among medical staff

**Policy:** Develop policies to have regular promotional program to motivate regular clients and promotion of clinic in social media with appropriate methods



## STAFF SATISFACTION SURVEY:

Things to consider in order to make staff work satisfactory :

- Focus on training, personal development and progress
- Organize thematic programs to improve organizational internal environment
- Pay attention to staff health situation and allow opportunities to receive free medical services especially free vaccination



## MEMBERS AND VOLUNTEERS' ATTITUDE SURVEY:

Survey shows that the majority of members are over 40 years old and often appears to be working in the health care system. Members consider that it is necessary to ensure funding and working environment, experience sharing between members and volunteers, regular organization of trainings and seminars, renew the membership, provision of information and related materials to members and volunteers regularly, conduction of large scale campaign to cover mass to introduce about the association in order to improve association's activities and to work efficiently.



# MONGOLIAN FAMILY WELFARE ASSOCIATION





The MFWA is a voluntary, non-governmental, non-profit, non-political, non-religious organization that was established in 1994 and became an associate member of the International Planned Parenthood Federation (IPPF) in 1996. MFWA became a full member association in 2005 for its compliance with constitutional, governance, programme and management provisions in the Standards and Responsibilities of IPPF membership and was reaccredited in 2010.

MFWA receives annual funding from IPPF. We work in close partnership with international organizations such as UNFPA, SAAF, ICA, JOICFP, CFPA as well as other governmental, national and NGOs.



**VISION**  
FOR THE HEALTHY SOCIETY  
IN WHICH ALL PEOPLE  
ENJOY WITH THEIR RIGHTS  
AND ABLE TO MAKE WIDER  
CHOICES

**MISSION**  
TO CHAMPION AND  
PROVIDE SEXUAL AND  
REPRODUCTIVE HEALTH AND  
RIGHTS EDUCATION AND  
ACCESSIBLE, EQUITABLE AND  
QUALITY SERVICES FOR ALL



#### CORE VALUES:

1. Respect rights
2. Good quality and reliability
3. United and partnering
4. Volunteering and wider membership and supporters
5. Accountable and transparent

## MONGOLIAN FAMILY WELFARE ASSOCIATION BECAME THE FIRST MONGOLIAN NGO GRANTED WITH UN ECOSOC SPECIAL CONSULTATIVE STATUS

MFWA has applied to UN NGO Committee from 1st June 2014 to have UN ECOSOC consultative status for the first time and UN NGO Committee meeting dated between 26 Jan -4 Feb 2015 in New York, USA and MFWA was recommended for special consultative status at the 2015 regular session of the Committee on NGOs. Later on Economic and Social Council (ECOSOC) at its Coordination and management meeting of 8 April 2015 adopted the recommendation of the Committee on Non-Governmental Organizations (NGOs) to grant special consultative status to Mongolian Family Welfare Association.

We, MFWA is provided with following opportunities by having UN ECOSOC special consultative status

- Provide expert analysis on issues directly from its experience in the field
- Serve as an early warning agent
- Help monitor and implement international agreements
- Help raise public awareness of relevant issues
- Play a major role in advancing United Nations goals and objectives
- Contribute with essential information at organization events.
- Attend international conferences and events and make written and oral statements at these events, organize side events;
- Enter United Nations premises in New York, Austria and Geneva
- Have opportunities to network and lobby and so on.

# MFWA'S STRATEGIC PLAN 2016-2022

**OUR VISION:** For the healthy society in which all people enjoy with their rights and able to make wider choices

**OUR MISSION:** To champion and provide sexual and reproductive health and rights education and accessible, equitable and quality services for all

**OUTCOME 1**  
ENABLING POLICY AND LEGAL ENVIRONMENT FOR SRHR EDUCATION AND SERVICES ARE CREATED.

## INDICATOR:

NUMBER OF LEGISLATIVE AND POLICY DOCUMENTS THAT NEWLY ENDORSED OR AMENDED WITH POSITIVE CHANGES

### OBJECTIVE 1

Champion policy advocacy with government to strengthen supportive legislative environment for SRHR and gender equality

### INDICATOR

At least 3 legislative acts newly endorsed or made amendment in favour of SRHR

### PRIORITY ACTIVITIES

Will undertake following advocacy activities to create enabling environment for SRHR and gender equality:

- Establish working group to advocate inclusion of SRH education into secondary school official curriculum as mandatory subject and provide support
- Set up working group to advocate for inclusion of medical services provided by outpatient clinics into health insurance scheme
- Establish working group to make change in existing legal regulations in provision of special permission to accredited NGOs/private clinics to deliver safe abortion care
- Develop advocacy strategy and implement through above working groups
- Conduct document review of relevant laws and policies
- Develop fact sheet and use for advocacy efforts
- Organize advocacy meetings and events in collaboration with partners and stakeholders among decision makers and government bodies.



### OBJECTIVE 2

Enhance capacity of advocates through the leader advocate initiative for SRHR and gender equality

### INDICATOR

Number of trained active leader advocates

### PRIORITY ACTIVITIES

- Establish working group to develop the leader advocate initiative to create supportive environment for SRH education, quality improvement of RH services, prevention of GBV and enhanced youth participation and support their activities;
- Review of similar international and local good practices
- Develop, pretest and finalize training module, tools and supporting documents for leader advocates
- Conduct trainings and train 20-40 leader advocates every year
- Partner with health social workers and family clinics to support the leader advocates initiatives
- Conduct refresher trainings and annual experience sharing meetings and knowledge exchange among leader advocates
- Evaluate the the leader advocate initiative
- Enhance youth participation in the initiative and create larger social movement

## OUTCOME 2

1,300,000 PEOPLE INCLUDING 15-34 YEARS ADOLESCENTS AND YOUNG PEOPLE HAVE ACQUIRED SRHR INFORMATION, KNOWLEDGE AND SKILLS.

### INDICATOR:

NUMBER OF PEOPLE WHO ACQUIRED SRHR INFORMATION, KNOWLEDGE AND SKILLS

### OUR CORE VALUES:

- 1-Respect rights;
- 2- Good quality and reliability;
- 3- United and partnering;
- 4- Volunteering and wider membership and supporters;
- 5- Accountable and transparent.



### OBJECTIVE 3

Introduce innovative approaches to enable 15-34 years adolescents and young people to access SRHR information, knowledge and skills

#### INDICATOR

- Number of innovative initiatives introduced into practice
- Number of adolescents and young people reached
- Number of people who accessed online information sites
- Number of people who attended in online interactive training course and received certificate

#### PRIORITY ACTIVITIES

- Develop online interactive training module and tools for adolescents and young people to increase access to SRHR information, knowledge and skills and their self evaluation
- Organize online training course and provide certificate for adolescents and young participants and encourage them to become PEs
- Review of similar online interactive youth training programs in other countries and learn from their successful experiences
- Take lead role in developing content and design of behaviour change information and communication materials in SRHR and partner with government lead organization in this area

### OBJECTIVE 4

Develop the model peer education program in SRHR and introduce it at national level

#### INDICATOR

- Approval of model PE program by the government authority
- Number of trained PEs and PETs and number of people reached by them
- Number of young people participated in activities organized by the Y PEER network

#### PRIORITY ACTIVITIES

- Conduct situation analysis on adolescent and youth SRHR and define their needs
- Increase number of Y PEER clubs and create most appropriate mechanism to ensure sustainability of their activities
- Develop model SRHR PE program and organize pilot testing in selected areas
- Get approval by relevant government authority
- Conduct PE trainings by using the model program and train PEs and PETs and support their activities;
- Monitor and evaluate the model PE program
- Document good practices, organize annual experience and knowledge sharing events
- Improve incentive system and performance evaluation mechanism of PEs
- Conduct interventions for community empowerment.
- leader advocates
- Evaluate the the leader advocate initiative
- Enhance youth participation in the initiative and create larger social movement

### OUTCOME 3

1,600,000 PEOPLE HAVE RECEIVED INTEGRATED AND QUALITY SRH SERVICES.

**INDICATOR:**  
NUMBER OF PEOPLE PROVIDED WITH SRH SERVICES

#### OUR CORE VALUES:

- 1-Respect rights;
- 2- Good quality and reliability;
- 3- United and partnering;
- 4- Volunteering and wider membership and supporters;
- 5- Accountable and transparent.

#### OBJECTIVE 5

Expand coverage and categories of SRH services

#### INDICATOR

Total number of SRH services delivered and

- Newly introduced
- Total number of people received SRH services and
- Percentage of disadvantaged groups
- Number of FP clients
- Provided with FP counseling
- Provided with FP methods
- Number of clients delivered STI services
- Number of people reached by volunteers
- Number of clients reached through mobile services
- Status of client satisfaction

#### PRIORITY ACTIVITIES

- Mobilize and expand volunteer's involvement in SRHR and organize meetings and events
- Conduct bi-lateral discussions and consultations with Ministry of Health and health organizations to expand mobile services
- Establish MoU with relevant partners
- Expand FP services
- Undertake research and cost estimation to introduce face to face, online psychological counseling and counseling by phone;
- Introduce psychological counseling services

#### OBJECTIVE 6

Introduce SRH services for boys and men

#### INDICATOR

- Total number of boys and men who received SRH services and
- 15-24 years olds
- Number of SRH services introduced for boys and men

#### PRIORITY ACTIVITIES

- Conduct assessment on access to and needs of SRHR services among boys and men
- Take actions step by step to introduce SRH services for men particularly adolescent boys including training of service providers, procurement of equipments and supplies and preparation of work space etc
- Deliver SRHR information, counseling and services for boys and men in partnership with government and non government organizations.



## OUTCOME 4 VOLUNTEERS, MEMBERS AND SUPPORTERS-BASED ACCOUNTABLE AND UNITED ASSOCIATION WITH SKILLED HUMAN RESOURCE

**INDICATOR:**  
CERTIFICATION STATUS  
FOR IPPF'S ACCREDITATION.

### OUR CORE VALUES:

- 1-Respect rights;
- 2- Good quality and reliability;
- 3- United and partnering;
- 4- Volunteering and wider membership and supporters;
- 5- Accountable and transparent.

### OBJECTIVE 7

Ensure good governance practice and transparency and enable better performance and increase financial resources

#### INDICATOR

- Uncertified opinion of auditor
- Annual financial income
- Percentage of annual income growth rate
- Number of Association's policy and regulations updated
- Access to and transparency of management meeting decisions and information

#### PRIORITY ACTIVITIES

- Organize regular meetings of the Association's Board, Executive Council and Field Branch managers and election in timely manner and ensure follow up of decisions
- Expand collaboration with international and national organizations;
- Ensure easy access to the Association's policies, regulations, plans, management decisions, and upload them to the Association's website and disseminate to members
- Conduct training on good governance for field office board and members
- Increase financial resources through resource mobilization efforts
- Establish social business entity (LLC), recruit marketing & sales officers, develop and implement business & marketing plan
- Develop project proposals and submit to international and local donors and implement
- Organize resource mobilization events
- Pay special attention to local resource mobilization and increase financial resources of branches
- Undertake regular monitoring and evaluation

### OBJECTIVE 8

Strengthen field branches through capacity development of of volunteers, members and supporters

#### INDICATOR

At least 3 field branches have upgraded as model branch

#### PRIORITY ACTIVITIES

- Undertake various actions to strengthen organizational capacity of field branches in Orkhon, Uvurkhangaï and Tuve aimags in the first round and provide support to have full-time staff, premise and improve their financial capacity and skills of members;
- Develop guideline of model branch
- Initiate different brand activities
- Promote Association's membership advantages and expand recruitment of members including celebrities and specialists in different areas
- Implement specific strategy to secure sustainability of members particularly young members
- Provide effective management guidance and training for field managers
- Brokering to establish linkage between the field branches and foreign organizations
- Improve incentive system for branches, volunteers, members
- Organize international exchange visits
- Ensure sustainability of good practices
- Improve capacity of volunteers by involving them in training once a year
- Support branches through regular monitoring visits and supportive supervision
- Enhance staff development through systematic skills development trainings and other measures

# RESOURCE MOBILIZATION STRATEGY

**GOAL:** Improve financial capacity and increase financial resources

**OBJECTIVES:**

1. Doubled national income
2. Increased financial resources for MFWA branches
3. Increased on resource mobilization and fund raising

**INDICATORS :**

- 1.1 PERCENTAGE OF LOCAL INCOME
- 1.2 TYPES OF FINANCIAL RESOURCES INCREASED
- 1.3 TYPES OF FINANCIAL RESOURCES /BY NUMBERS
- 1.4 PERCENTAGE OF IPPF FUND DEPENDENCY
- 1.5 AUDIT REPORTS TO BE SATISFIED

I. NATIONAL INCOME	II. FINANCIAL RESOURCES
Expansion of clinic and its service type <ul style="list-style-type: none"> <li>• Number of the clinic clients</li> <li>• Service type</li> <li>• Human resources</li> <li>• Capacity and facilities</li> </ul>	<ul style="list-style-type: none"> <li>• Self assessment /financial situational analysis and other analysis/</li> <li>• Donor mapping</li> </ul>
Paid trainings	Contacting with potential donors <ul style="list-style-type: none"> <li>• International organizations /international and local/</li> <li>• Trusts and Foundations</li> <li>• Private companies</li> <li>• Local government /MPs, Ministries and others/</li> <li>• Individuals</li> </ul>
Selling of commodities <ul style="list-style-type: none"> <li>• Information training materials /manuals/</li> <li>• Others</li> </ul>	Development and printing of advocacy package / donor oriented-success and true life stories/
<b>Selling of contraceptives</b>	
<ul style="list-style-type: none"> <li>• Doubling of number of members</li> <li>• Renew the membership with different backgrounds</li> <li>• Recruit foreign people as members</li> <li>• Setting up social enterprise Co.Ltd /import of medical equipment and devices and contraceptives /</li> <li>• Running of enterprize, industry and services</li> <li>• Increase types of income</li> </ul>	
<b>Donation</b>	