



**THIRD ANNUAL FAMILY PLANNING EXPENDITURE  
TRACKING MEETING:  
TRANSPARENCY, ACCOUNTABILITY AND DOMESTIC  
RESOURCE MOBILIZATION**

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## BACKGROUND

At the inaugural 2016 meeting in South Africa, the Family Planning Budget Advocacy Expert Group sketched out the common framework based on the shared experiences of the transparency and accountability communities and also identified sources of data for the indicators.<sup>1</sup>

The second annual meeting in Chisamba, Zambia resulted in a refined common framework and led to the establishment of a real-time tracking tool for project partners. The tool complements the framework's end-of-budget-year scorecard, allowing partners to input data and monitor indicators to inform advocacy throughout the budget year.<sup>2</sup> Following the Chisamba meeting, civil society organizations—MANASO in Malawi, TCDC in Tanzania, Samasha Medical Foundation in Uganda and CRHE in Zambia—piloted data collection. PAI developed the real-time tracking tool using Google Sheets in consultation with Samasha and the project partners, and Samasha also provided one-on-one technical support for country data collection.

In 2018, the Family Planning Budget Advocacy Expert Group reconvened in Dar es Salaam, Tanzania to develop a draft country scorecard, which presents the common framework indicators using language relatable to officials at ministries of health and finance in sub-Saharan African countries. The group also improved the framework indicators, particularly related to outcome and transparency. Please see Annex 1 for the refined framework of indicators. The meeting identified opportunities to:

- (a) Use the scorecard to build nation-to-nation peer pressure;
- (b) Improve transparency of government spending on family planning; and
- (c) Mobilize government funding for family planning as part of health financing reforms.

This meeting report documents the outcomes and next steps of the meeting.



# 1. THE COMMON FRAMEWORK

In most sub-Saharan African countries, donor funding makes up most of the support for family planning programs. However, this funding is often unpredictable and can be tied to harmful policy restrictions such as the U.S.-imposed Global Gag Rule.<sup>3</sup> Government reliance on donor funding for family planning creates an accountability breakdown, where aid-dependent governments' focus is on maintaining donor funding rather than sustainably financing contraceptive commodity security and provision of high-quality family planning information and services. This dynamic is starting to change, with increasing government commitments to mobilize internally generated revenue to finance family planning programs. To realize these commitments, governments must allocate funding through national and subnational budget processes and ensure their release and expenditure.

Civil society budget advocacy, monitoring and accountability play an important role in securing these commitments and ensuring that they translate into budgetary actions—and over time, build government ownership of family planning programs. Advocacy and accountability require access to official budget information to provide the evidence base behind the advocacy actions.

Access to official data on budget allocations for procurement of contraceptives is generally available, but there are persistent challenges accessing information on actual expenditures for contraceptives procured, as well as budget data on allocations and expenditures for broader family planning programs.

*“A budget is a promise. Budget tracking is accountability for that promise.”*

*Dr. Moses Muwonge*

Beginning in 2016, PAI has annually convened expert members of the family planning budget advocacy community. These dialogues have resulted in the creation of a common framework, or set of indicators, for measuring government spending on family planning. The purpose of the common framework is to develop a standard language for reporting family planning budget expenditures across countries and to measure and compare access to official budget data, or budget transparency. The framework is designed to assess follow-through on government commitments to family planning along the planning and budget cycle, moving from funding need, to allocation, disbursement, expenditure and, finally, outcome. Following this cycle is the link between evidence-based budget advocacy and accountability. As the technical support provider on this work, Dr. Moses Muwonge explained, “A budget is a promise. Budget tracking is accountability for that promise.”

## 2. NATIONAL AND CROSS-COUNTRY SCORECARDS

The next phase of this effort will pilot the common framework of indicators to provide evidence for advocacy with governments. Participants assessed the political climate in the pilot countries, debating whether comparing government performance to its own commitments is more powerful than comparing across countries to build government-to-government peer pressure. The prevailing perspective is that most governments feel that their country circumstances are unique, and thus may respond best to a country-specific scorecard that can adequately reflect the country context and nuance. However, it is possible that country-to-country comparisons will be useful for regional advocacy with intergovernmental bodies.

The group decided to proceed with a country-focused scorecard for each pilot country. Based on the findings of each country's scorecard, civil society partners will identify key priorities related to funding amounts, disbursement timelines and access to information about family planning budget allocations and expenditures. These key issues will be highlighted on the country-specific scorecards as recommendations, which are intended to support a broader advocacy strategy with specific SMART objectives to steer engagement in the 2019/2020 budget cycle.

Once each country-specific scorecard is complete, PAI will compile the data into a cross-country scorecard for pilot testing. The cross-national scorecard can be used as a secondary tool in national-level budget advocacy to illustrate how other countries compare. Collating feedback from the pilot country partners on the scorecard by which decision-makers were most influenced—and in what ways—will be important. For example, cross-country data on transparency may be powerful in urging governments to publish more budget information than they already produce.

The group will also form a small team to identify regional and global opportunities to disseminate the cross-country scorecard. At the regional level, there are intergovernmental organizations that may be able to advance government commitments to fund family planning programs or access to information. These institutions include the African Union, East African Community, Southern African Development Community, Ouagadougou Partnership, Economic Community of West African States and the West African Economic and Monetary Union (WEAMU). For example, WEAMU provides guidelines to member states on how to structure their budgets and could be receptive to adopting a set of standards such as the common framework in its guidance on reporting.

### SCORING SYSTEM

In reviewing the country-specific scorecard mockup, participants had heated debates on the scoring system for different indicators. The lack of benchmarks, or acceptable standards of government allocation and spending on family planning, was a persistent challenge. The group decided to present actual figures in the scorecard instead of scoring or rating indicators. Civil society budget advocacy experts are therefore not judging the data values, but rather presenting the data for the audience to evaluate for themselves.

Measuring transparency or access to information for budget monitoring and expenditure tracking is also important for accountability. However, there are currently no internationally accepted standards governing access to data at the level of specificity of budget items for family planning. Family planning budget items are often embedded within larger budget lines, or data is available from confidential sources and cannot be cited with confidence (or at all). To score each indicator in the common framework, the group therefore adapted the rating scale from the Open Budget Index, an internationally accepted scale for measuring public availability of budget items.<sup>4</sup>

**Table 1. Transparency Scoring System**

SCORE	DEFINITION	SOURCES OF DATA
1. Official data, publicly available	Data are produced and published on the website of the public agency that issues the data.	Approved budgets, approved workplans, approved strategic documents/Costed Implementation Plans, minutes of meeting (signed)
2. Official data, produced but made available only upon request, in hard or soft copy (not available online)	Data are produced and made available to the public, but only in hard copy (and are not available online). Or, data are made available to the public in soft (electronic) copy but are not available online.	Approved budgets, approved workplans, approved strategic documents
3. Official data, produced for internal purposes/use only	The data are only produced for internal purposes and not made available to the public. Or, data are produced for internal purposes, but made available to the public on condition that they are not to be used/cited, or the data are made available by a nonofficial source and thus cannot be used/cited.	Key informant interviews, speeches, minutes of meetings (unsigned), contacts
4. Data not produced	The data is not produced at all.	N/A

Only two types of data are usable: official, publicly available data and data that is available upon request with permission to use. Data that is produced (or even available), but not citable can be helpful in leading to a more credible source.

Data on funding for family planning that is embedded within larger programmatic budget lines hinders budget tracking and accountability efforts. Aggregated data on allocations, disbursements and expenditures for family planning are impossible to distinguish from the other budget items with which they are grouped. Disaggregation becomes an important advocacy issue. Therefore, in addition to transparency, the scorecard also designates whether the level of detail on budget items required to compute the indicator is sufficient.



### 3. DATA VALIDITY

The data used to populate the common framework must be valid to represent the figures that it is measuring. However, the common framework is also designed to be actionable. Data obtained in budget tracking must be obtained in a timely manner, typically within a budget year or for the previous budget year (T-0 and T-1). Therefore, the data used to populate the common framework has not been validated by a supreme audit institution. Final or audited data is only available two to three years after a financial year and is most useful for identifying trends over time (most existing efforts to track government funding for family planning use final, audited data). Taking steps to ensure the validity of data collected during budget tracking minimizes the likelihood that the common framework and the advocacy it is supporting can be called into question.

Using the most credible, official budget data is the best way to ensure that information is as valid as possible. Table 2 presents the typical data sources often used in tracking budget allocation and expenditure data for family planning. The “ideal data sources” are the gold standard, because the figures they contain are indisputable. In practice, family planning budget items are not necessarily contained in the ideal data sources. Often, family planning budget items are embedded within larger budget lines, particularly when looking beyond funding for contraceptives. Official data on disbursements and expenditures—even for contraceptives—is scarce, particularly within a budget year.

**Table 2. Valid Data Sources for Family Planning Budget Items: The Ideal and Practical**

IDEAL DATA SOURCES	DATA SOURCES USED IN PRACTICE
<ul style="list-style-type: none"> <li>• Budget statement</li> <li>• Approved budget validating allocation and expenditure</li> <li>• Disbursement sheet from Ministry of Health Record</li> <li>• Medium Term Expenditure Framework</li> <li>• Memo from Ministry of Health</li> </ul>	<ul style="list-style-type: none"> <li>• Meeting records and minutes of technical working group meetings, reproductive health commodity security committees</li> <li>• Email records</li> <li>• Key informant interviews</li> <li>• Communications (indicate date accessed)</li> <li>• Costed departmental workplans</li> <li>• Procurement documents (for contraceptives)</li> <li>• Annual quantification reports</li> </ul>

Less-than-perfect data sources are acceptable but require further scrutiny to ensure validity. Some considerations:

- Examine the numbers to see if they make sense—are the orders of magnitude consistent with what one would expect?
- Triangulate data obtained with other sources. If information is obtained verbally, verify data with any written information that can be obtained (preferably from a different source).
- If multiple documents indicate different numbers, seek guidance from a key informant on which to use.

Data validation is a process. To ensure that data is being interpreted correctly, partners should request guidance from key informants who produced the reference document. Sharing key findings with target audiences and allies ahead of publication can ensure their support. Validation meetings are an opportunity to ask if anything has changed since the data was provided.

Validity is also important for ensuring the integrity of data that is compared across countries. In addition to the common framework, the group developed recommended standard approaches to data collection and reporting, such as reporting all data in local currency, then converting to U.S. dollars using the average exchange rate reported by a country’s central bank. The scorecards use local currency to calculate the indicators wherever possible to avoid exchange rate effects. However, currency fluctuations can be important because contraceptives are typically purchased in overseas markets in U.S. dollars or euros. Recording data sources so they can be verified is also key to ensuring data comparability and quality.

## 4. BOUNDARIES OF THE MOVEMENT

The annual Family Planning Budget Advocacy Expert Group meetings are important opportunities to assess efforts to use budget monitoring and expenditure tracking to hold policymakers accountable for their promises to improve family planning and broader sexual and reproductive health rights. Every year, participants begin exploring issues that cannot be resolved and mark the boundaries of the field.

### PROGRAMS COSTS AND DISENTANGLING HEALTH BUDGETS

High-quality family planning programs are comprised of much more than the procurement of contraceptives.<sup>5</sup> We sought to identify these budget items in the pilot countries, despite the expected challenges. Unfortunately, none of the pilot budget and expenditure tracking efforts were able to identify any budget items related to family planning programs beyond contraceptives. This is due to a few factors:

- Considerable advocacy has focused on governments' critical role in procuring contraceptives, but there has been little sustained pressure on government funding for broader aspects of family planning programs.
- Government commitments to broader aspects of family planning programs, such as youth-friendly services, are difficult to track because the related budget items are embedded in larger budget lines.
- In many aid-dependent countries, governments rely on donors to pay for family planning-specific budget items such as behavior change communications, training of family planning providers, etc.
- Governments focus their investments in upgrading or maintaining health facilities that house family planning programs, maintaining the roads that are used to transport clients to facilities and paying for the salaries of health workers that provide family planning services. These infrastructure investments are important to support the health system, but are not specific to family planning.

The trends in financing for health are moving away from isolating funding for vertical programs like family planning and moving toward a focus on investing in health systems. Budget lines for primary health care (PHC) are emerging in budgets across sub-Saharan Africa, but there is no existing research across countries that reviews what PHC budget lines are funding. Health financing reforms in support of universal health coverage also bring a focus on the health system, but it will be important to ensure that family planning programs (broadly defined) are part of the packages of services. The solution to aggregated streams of funding is to identify the inputs, then monitor the results to see what kind of impact funding is having on family planning outcomes.

This challenge of budget items being spread across ministries and within larger budget lines is beyond family planning programs. For example, adolescent health budgets are spread across ministries and within budget lines. In Zambia, budget advocates have pushed to have a specific budget line for adolescent health to be able to track performance. Without specific budget lines, the current efforts to hold policymakers accountable for budget commitments against child marriage and in support of menstrual hygiene management will face similar challenges.



## LINKING NATIONAL AND SUBNATIONAL ADVOCACY AND ACCOUNTABILITY

Every year, we ask the same question: Is the money for family planning really flowing to facilities? In many countries in sub-Saharan Africa, budget advocates are engaging with health committees and other structures at district and county levels to allocate their own resources for family planning programs. Sometimes these funds for subnational governments are transferred from national treasuries; other times they are from locally generated revenue. In Tanzania, the district Comprehensive Council Health Plans (CCHPs) do not produce standalone family planning budgets—family planning is embedded within the maternal and child health budget line. Advocates are currently engaging to establish a separate budget line for family planning in select districts.

Multilevel accountability linking national and subnational engagement is challenging. There is a long timeframe required for budget advocacy to mobilize funding in a national budget, follow up in the next budget cycle to ensure that funding is distributed in a timely manner and can be absorbed by subnational governments, then learn and modify the approach to be more effective the following budget cycle. It may be too soon to link national and subnational budget advocacy for family planning in a systematic way. But, there are opportunities to pilot the approach where there is a strong likelihood of success. Working at subnational level, there are also opportunities to move beyond quantity of funding to linking with social accountability efforts focused on the quality of services communities receive.

## ANNEX 1. COMMON FRAMEWORK, UPDATED AUGUST 2018

INDICATOR	DEFINITION	USEFUL FOR
FUNDING NEED	1. Amount of funding needed to achieve family planning goals in a given year, as understood by the government	Input into the real-time tracking tool and scorecard
ALLOCATION	2. <b>ADEQUACY/SUFFICIENCY:</b> Government allocation for family planning as a percentage of total funding need in a given year <sup>6</sup>	Useful for real-time tracking; Input into the scorecard
	3. <b>PRIORITY:</b> Government budget allocation to family planning as a percentage of the government budget allocation to health	Useful for real-time tracking; Scorecard indicator
DISBURSEMENT	4. Funding disbursed to date as a percentage of funding allocated for family planning	Useful for real-time tracking
	5. <b>TIMELINESS:</b> Percentage of the government family planning budget disbursed as scheduled	Scorecard indicator
EXPENDITURE	6. <b>BUDGET EXECUTION:</b> Percentage of government expenditure on allocated funds to family planning	Scorecard indicator
	7. <b>ABSORPTION:</b> Percentage of government expenditure on funds disbursed from Ministry of Finance to Ministry of Health	Useful for real-time tracking; Scorecard indicator
	8. <b>COVERAGE:</b> Annual government expenditure on family planning per woman of reproductive age	Scorecard indicator
OUTCOME	9. <b>PERFORMANCE AND OWNERSHIP:</b> Government expenditure on family planning as a percentage of total funding needed	Scorecard indicator
TRANSPARENCY	10. Allocation and expenditure information on each family planning budget item that is publicly available, including level of detail and timeliness of information	Impacts availability of data for real-time tracking and scorecard; Reflected on the scorecard for each indicator

<sup>6</sup>All indicators measure domestic general government health expenditure (GGHE-D), as defined in the System of Health Accounts 2011 system of reporting. For the purposes of the framework, we simplify the language to simply "government."

## ANNEX 2. LIST OF PARTICIPANTS

PARTICIPANT	ORGANIZATION	COUNTRY	EMAIL
<b>Abigail Dzimadzi</b>	Executive Director, Malawi Network of AIDS Service Organisations (MANASO)	Malawi	abdzimadzi@gmail.com
<b>Abu Msemo</b>	Tanzania Communication and Development Center (TCDC)	Tanzania	amsemo@tcdctz.org
<b>Achilles Kiwanuka</b>	Program Officer, Partners in Population and Development, Africa Regional Office (PPD-ARO)	Uganda	akiwanuka@ppdsec.org
<b>Amanda Burgess</b>	Program Specialist, Advance Family Planning	USA	aburges5@jhu.edu
<b>Aminu Magashi</b>	Founder, Africa Health Budget Network	Nigeria	a.magashi@evidence4action.net
<b>Amos Mwale</b>	Executive Director, Centre for Reproductive Health and Education (CRHE)	Zambia	amosza@gmail.com
<b>Angeline Mutunga</b>	Global Director for Advocacy and Policy, JHPIEGO	Kenya	angeline.mutunga@jhpiego.org
<b>Benedict Chinsakaso</b>	Health Systems Advocacy Manager, Amref Health Africa	Malawi	benedict.chinsakaso@amref.org
<b>Celestin Compaore</b>	Executive Director, <i>SOS/Jeunesse et Défis</i>	Burkina Faso	compaorecelestin@gmail.com
<b>Christopher Mlelemba</b>	Programs Director, Centre for Reproductive Health and Education (CRHE)	Zambia	cmlelemba@gmail.com
<b>Cornelia Asiimwe</b>	Advocacy and Accountability Manager, Samasha Medical Foundation	Uganda	casiimwe@samasha.org
<b>Dembele Yoropo Abdoul</b>	<i>Directeur, Centre d'étude et de Recherche Appliquée en Finance Publique</i> /Director, Center for Studies and Applied Research in Public Finance (CERAFP)	Burkina Faso	abdoulyoropo@yahoo.fr
<b>Deo Ng'wanansabi</b>	Executive Director, Tanzania Communication and Development Center (TCDC)	Tanzania	dng'wanansabi@tcdctz.org
<b>Dona Anyona</b>	Regional Policy Manager, Amref Health Africa	Kenya	Dona.Anyona@Amref.org

PARTICIPANT	ORGANIZATION	COUNTRY	EMAIL
<b>Dorcus Indalo</b>	Project Manager, Amref Health Africa	Kenya	Dorcus.Indalo@Amref.org
<b>Fadhili Msuri</b>	CEO, Kenya Muslim Youth Development Organization (KMYDO)	Kenya	fadhilims@gmail.com
<b>Godfrey Boniventura</b>	Head of Programs, HakiElimu	Tanzania	boniventura.godfrey@hakielimu.org
<b>Greysmo Mutashobya</b>	Policy Monitoring and Advocacy Manager, Health Promotion Trust Tanzania (HDT)	Tanzania	advocacy@hdt.or.tz
<b>Habeeb Salami</b>	Global Advocacy Director, Pathfinder International	Nigeria	HSalami@pathfinder.org
<b>Harouna Ouedraogo</b>	<i>Chargé du suivi-évaluation/</i> Monitoring and Evaluation Officer, SOS/Jeunesse et Défis	Burkina Faso	ouedharouna@sosjd.org; ouedharouna@gmail.com
<b>James Mlali</b>	Advocacy Technical Manager, Center for Communication Program (CCP Tanzania), Advance Family Planning	Tanzania	Jmlali@jhuccptz.org
<b>Josiah Otege</b>	Advocacy Manager, Amref Health Africa	Tanzania	Josiah.Otege@Amref.org
<b>Joyce Kyalo</b>	Regional Health Financing and Advocacy Advisor, E4A-Mamaye	Kenya	j.kyalo@evidence4action.net
<b>Juiet Tumuhairwe</b>	Monitoring and Evaluation Officer, Track20 Uganda	Uganda	tumuhairwejuliet@gmail.com
<b>Julius Chingwalu</b>	Family Planning Advisor, Health Policy Plus (HPP+)/Palladium Malawi	Malawi	julius.chingwalu@thepalladiumgroup.com
<b>Kate Cho</b>	Senior Program Officer, Advocacy, The Challenge Initiative (TCI)	USA	kcho@jhu.edu
<b>Lethia Bernard</b>	Research and Policy Analyst, PAI	USA	lbernard@pai.org
<b>Linh Nguyen</b>	Monitoring and Evaluation Officer, Advance Family Planning	USA	linh.nguyen@jhu.edu
<b>Moses Muwonge</b>	Executive Director, Samasha Medical Foundation	Uganda	drmuwonge@gmail.com
<b>Nazir Yusuph</b>	Monitoring and Evaluation Officer, Tanzania Communication and Development Center (TCDC)	Tanzania	nyusuph@tcdctz.org



PARTICIPANT	ORGANIZATION	COUNTRY	EMAIL
<b>Nour Nadri</b>	Policy and Advocacy Coordinator, PAI	USA	nnadri@pai.org
<b>Peter Bujari</b>	Executive Director, Health Promotion Trust Tanzania (HDT)	Tanzania	ed@hdt.ortz
<b>Peter da Costa</b>	Technical Advisor, William and Flora Hewlett Foundation	Kenya	peter.dacosta@gmail.com
<b>Richard Mugenyi</b>	Advocacy and Communications Manager, Reproductive Health Uganda (RHU)	Uganda	rmugenyi@rhu.or.ug
<b>Salisu Musa</b>	Director Finance and Operations/ acting Executive Director of Community Health and Research Initiative Nigeria (CHR) and Africa Health Budget Network	Nigeria	salisu.musa@chnigeria.info
<b>Sandra Mapemba</b>	Deputy Director-Technical, Health Policy Plus (HPP+)/Palladium Malawi	Malawi	Sandra.Mapemba@thepalladiumgroup.com
<b>SORO Abdoudou Nabeihoua</b>	<i>Responsable Plaidoyer/Advocacy Officer, Médecins du Monde/ Doctors of the World (MdM)</i>	Cote d'Ivoire	advocacy.cotedivoire@medecinsdumonde.net
<b>Suzanna Dennis</b>	Senior Advisor, Health Financing, PAI	USA	sdennis@pai.org
<b>Tom Kulumba</b>	Project Officer, Amref Health Africa	Uganda	Tom.Kulumba@Amref.org
<b>Abdoul-Wahab Amadou Issoufou</b>	Independent Consultant	Niger	ai.wahab@yahoo.fr
<b>Wendy Turnbull</b>	Senior Advisor, International Advocacy, PAI	USA	turnbull@pai.org
<b>Wezi Mojo</b>	Technical Advisor, Malawi Network of AIDS Service Organisations (MANASO)	Malawi	Mjojow@manaso.org

## ENDNOTES

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Through PAI's Government Accountability for Family Planning Budgets initiative, its civil society partners in six countries—Burkina Faso, Côte d'Ivoire, Malawi, Tanzania, Uganda and Zambia—conduct budget monitoring and advocacy to increase government investments in family planning, ensure that the funds are being properly disbursed and used, and push for increased transparency of family planning budget information.

Government Accountability project web page:  
[www.pai.org/budget-accountability](http://www.pai.org/budget-accountability)