IMPACT BRIEF

Understanding the Impact of Foreign Aid Disruptions on International Family Planning and Reproductive Health CSOs

On the first day of his second term in office, U.S. President Donald Trump issued an executive order to pause and review all U.S. foreign development assistance which resulted in the termination of 83 percent of USAID's programs including international family planning and reproductive health programs. As the largest donor for this work, the abrupt termination not only disrupted essential global health and development programs funded by the U.S., it had global cascading consequences. FP2030 was among the groups impacted, having previously received funding from USAID to advance access to and advocate for family planning around the world. Other key international family planning and reproductive health donor governments have indicated cuts to their own official development assistance, deepening the crisis in family planning and reproductive health.

To understand the implications of these developments, FP2030 initiated an assessment of the immediate and projected implications for international family planning and reproductive health programming. This included more than 25 conversations with FP2030 focal points and trusted partners across our global network and regional hubs, as well as a questionnaire distributed to stakeholders, including government officials, international non-governmental organizations), civil society organizations (CSOs), private sector actors, donors, and multilateral institutions. The information collected reflects the respondents' perceptions and is not meant to provide precise and official information on the entire impact of USAID funding cuts. This brief on CSOs is part of a broader series of briefs that capture key areas of impact and provide recommendations for moving forward.

Impact of USAID Funding Termination on CSOs

CSOs are among the first to respond to community needs and experience some of the most significant impacts from shifts in donor priorities. The USAID funding termination has disrupted CSOs' ability to provide life-saving care and continue to pay their staff. What follows is an overview of key themes based on conversations FP2030 has had with trusted partners and the results from our questionnaire. This brief aims to highlight critical insights and signal potential trends for longer term impact while centering the voices and experiences of CSOs operating at the frontlines of family planning and reproductive health.

Civil society organizations (CSOs) are non-governmental, non-profit groups that deliver services, advocate for policy change, and promote accountability. CSOs include non-governmental organizations (NGOs), community-based organizations, advocacy organizations networks, and youth-led organizations, among others, and are key partners in advancing equitable, rights-based family planning. They provide services to the most marginalized and hardest to reach populations and build inclusive coalitions to pursue advocacy and accountability efforts, ensuring rights-based family planning policies and services.

Staff Layoffs and Reduced Employment Security

The sudden loss of USAID funding led many CSOs to make difficult staffing decisions. Job losses were widespread, mainly in organizations that relied heavily on USAID-funded projects. The CSO Copper Rose Zambia, reported laying off 60 percent of its staff shortly after receiving its USAID stop work order. Yayasan Cipta, an Indonesian CSO, faced similar difficulties, cutting over half of its staff due to the funding loss. Even when organizations like Samasha Medical Foundation in Uganda were able to retain their team, they had to scale back their work hours, which added strain and uncertainty for employees. These shifts disrupted ongoing programs and made it more difficult to retain staff with critical expertise. The staffing reductions disrupt service delivery, undermine movement building, and create gaps in specialized knowledge at a time when expertise is needed more than ever. CSOs have also reported challenges to staff morale, trust, and retention as uncertainty around long-term employment continues to loom.

USAID funding cuts forced many organizations to lay off staff or reduce staff hours, even in countries where U.S. funding wasn't the primary source of family planning programming. These loses impact staff morale and organizations' ability to continue critical programs.

Halted or Scaled Back Programs and Services

Organizations reported a significant reduction in programmatic reach. Programs, such as advocacy trainings for domestic resource mobilization in Nigeria and youth-centered projects targeting over 2 million young people in Ethiopia, were either canceled or dramatically downsized.

In Ethiopia, a project empowering young people, especially young women and young people with disabilities, through civic engagement, economic opportunity, and access was halted due to USAID funding cuts.

FP2030 had funding from USAID to support CSO led accountability in Africa and Asia, but this program was stopped when FP2030's award was terminated. These cutbacks have hit vulnerable groups the hardest, especially young people and marginalized communities. Youth-led advocacy programs were some of the first programs to be cut. When outreach and training sessions were halted, progress slowed and community trust weakened. For many CSOs, the setbacks mean rebuilding relationships and securing new funding to resume services that had long-term impacts.

Increased Competition and Resource Scarcity

The funding vacuum left by USAID has resulted in increased competition for shrinking donor resources. CSOs that had not previously relied on USAID now find themselves in a more crowded funding environment as organizations scramble to secure remaining grants. The Centre for Reproductive Health and Education in Zambia reported that smaller and more flexible funding sources are being overwhelmed by new applicants, resulting in tougher application processes and delayed decisions. These dynamics have forced many CSOs to redirect time and staff from lifesaving program implementation and advocacy initiatives to fundraising. In the long term, this can hamper innovation and diminish the effectiveness of existing programs, particularly for organizations without deep connections in philanthropy or the organizational infrastructure to meet growing donor demands. Some organizations fear they might have to shut down without new funding sources.

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Shift Toward "Quick Wins" Interventions Over Systematic Long-Term Solutions

As donor priorities shift, CSOs observe a donor preference for projects that produce fast, tangible, and measurable outcomes for communities, such as healthcare service delivery. This shift has made securing funding for advocacy, policy change, and community mobilization more difficult. Several CSOs emphasized that without sustained investment in advocacy around universal health coverage and primary health care, the broader goals of equitable and scalable health service expansion will remain out of reach. Population

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Foundation of India and other partners noted that funding for initiatives focused on long-term systemic reforms has been deprioritized. This puts pressure on CSOs to align with donor expectations at the expense of their organizational missions. This transition risks eroding the hard-fought policy changes and the field's ability to sustain impact through public accountability.

Organizational Restructuring and Strategic Shifts

In response to the shifting donor landscape and financial instability, several CSOs have begun restructuring their operations and reconsidering their strategic direction. Visible Impact, a youth-led organization in Nepal, has explored growing its private-sector work and diversifying its programmatic themes to include technology and innovation to make itself more appealing to new sectors. Similarly, Copper Rose Zambia is expanding its thematic reach to increase its work with climate organizations. While diversification may offer resilience, these shifts also bring the risk of mission drift, pushing organizations to choose between critical family planning initiatives and other donor priorities, especially when change is driven more by funding opportunities than by community needs. Some organizations are rethinking their legal structure and staff benefits, aiming to remain viable in this new and increasingly uncertain funding environment.

CSOs are expanding their missions to make them more appealing to donors. While new areas of work might drive funding, it may cause some organizations to shift away from the important work they have done to accelerate rights-based family planning in the past.

Reduced Participation in Coalitions and Networks

The reduction of USAID funding has weakened civil society participation in national and international coalitions leading to loss of technical expertise and diminished influence in shaping policy and accountability agendas. Groups like the Asia Pacific Alliance and Population Foundation of India described declining engagement in regional forums and advocacy coalitions due to travel constraints, staff shortages, and resource limitations. The Association for the Advancement of Family Planning in Nigeria canceled training events that supported grassroots leadership development. As these networks weaken, it becomes increasingly difficult for communities to shape policy, work together effectively, or articulate a unified message on important issues. It also undermines the legitimacy and visibility of CSOs, both of which are critical for sustained funding and impact.

CSOs have invested years in building strong and diverse coalitions that have measurable impacts on family planning. As CSOs downsize and shift priorities, coalitions face challenges in sustaining their influence in policy and budgeting decisions.

Next Steps and Recommendations

To address the broad impact of the USAID funding terminations, donors, governments, CSOs, and other stakeholders should consider the following actions:

Donors:

- **Provide flexible, unrestricted, long-term funding:** Offer funding that covers operational, indirect, and personnel costs, in addition to supporting innovations that are scalable, rather than restricting support to short-term, project-based grants.
- **Prioritize advocacy and systems change:** Ensure funding includes support for policy advocacy, movement building, capacity strengthening, and community engagement, for continued progress on accelerating right-based family planning programs.
- **Support localization efforts:** Fund local organizations directly and invest in their capacity to manage and scale programs sustainably.

Governments:

- **Increase domestic resources for family planning:** Allocate greater resources to family planning and reproductive health programming and supplies in national and subnational budgets, with clear lines of accountability.
- **Engage CSOs in policy design:** Include CSOs as formal stakeholders in policy-making, budgeting, and monitoring processes to ensure community needs are reflected.

CSOs:

- **Invest in capacity strengthening:** Support capacity strengthening of other CSOs and community organizations to advocate for national and subnational budget allocations can help shift funding reliance from international sources to more sustainable local financing.
- **Strengthen and broaden coalitions:** Bring new voices to strengthen solidarity for broader health initiatives, ensuring family planning isn't deprioritized.
- **Use evidence to make the case:** Sharing timely data, personal stories, and local experiences can help funders see the real-world impact of their decisions and understand what's at stake.
- **Build stronger donor relationships:** Staying open and collaborative with donors—sharing lessons learned and being transparent about challenges—can lead to deeper trust and more lasting, flexible support.

With intentional action from family planning stakeholders, CSOs can continue to be a cornerstone of family planning and reproductive health services, advocacy, and accountability, even in an increasingly uncertain funding environment.

FP2030 will continue to capture the impacts of funding disruptions over the next year, elevating the stories and experiences to continue to make the case to prioritize family planning and ensure the realities CSOs face drive how the field responds to this funding crisis. We are committed to amplifying voices, sharing real-time stories, and advocating for sustained investment in rights-based, locally led solutions. FP2030 will continue supporting CSOs to protect and accelerate rights-based family planning. Without a vibrant and well-resourced civil society, many problems the global community solved a decade ago will return.

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