The Saving Lives in Sierra Leone Programme (SLiSL) aims to reduce maternal, neonatal and child mortality by 25 per cent. The programme is being implemented by the United Nations Children’s Fund (UNICEF), the United Nations Population Fund (UNFPA) and the World Health Organization (WHO) and is funded by the Government of the United Kingdom. These UN agencies are supporting the Ministry of Health and Sanitation to:

1. Ensure timely availability and accessibility of Free Health Care Initiative, family planning, and nutrition commodities as well as other essential supplies and equipment

2. Improve the availability of family planning and sexual and reproductive health services to adolescents and young people

3. Increase and strengthen the health workforce that provides essential health services including emergency referrals that contribute to reducing maternal, neonatal, and child mortality

4. Institutionalize a comprehensive framework for improving the quality of service delivery at all levels of health system

5. Enhance emergency and disease preparedness, surveillance and response capacity

In Sierra Leone, maternal, newborn and child mortality is unacceptably high. Maternal mortality is estimated at 770 per 100,000 live births and is among the highest in the world. Maternal mortality accounts for 36 per cent of all deaths among women aged 15-49. Neonatal, Infant and Child mortality are also high at 31, 75 and 122 per 1,000 live births respectively.¹ These rank Sierra Leone as one of the countries with the highest death rates of children in the world.

¹ Sierra Leone Demographic Health Survey 2019
Family planning

**FACT**

- **One in four** women of reproductive age in Sierra Leone want to use family planning but do not have access.²

**ACTION**

- The SLiSL programme, in partnership with the Ministry of Health and Sanitation, works to strengthen national capacity and national supply chain management to ensure there is a consistent and reliable mix of contraceptives available to clients. Capacity-building and mentorship of service providers is supported under the programme to provide quality, rights-based voluntary family planning services.

Adolescents and young people

**FACT**

- **21 per cent** of adolescents 15–19 years have commenced childbearing.³

**ACTION**

- Implementation of the National Strategy for the Reduction of Adolescent Pregnancy and Child Marriage 2018–2022 that aims to reduce adolescent pregnancy and child marriage;
- Increase availability of new and emerging contraceptives such as the self-injectable Depo Provera (Sayana Press) and the 2-rod implant, Levoplant, in Sierra Leone;

² Government of Sierra Leone, Sierra Leone Demographic Health Survey 2019.
³ Ibid.
Emergency referral services

FACT

• **Forty-one per cent** of all emergency obstetric and newborn care (EmONC) facilities lack one or two basic EmONC signal functions to provide to patients.4

ACTION

• The SLiSL programme aims to strengthen the capacity of referral hospitals to provide specialized maternal, newborn and child health and nutrition services. This is undertaken by expert specialists providing capacity-building to local service providers; provision of essential maternal, newborn and child health nutrition commodities; establishment and expansion of Special Baby Care Units (SBCUs) to provide quality specialized care for newborns.

Skilled health workforce

FACT

• It is estimated that Sierra Leone needs about 3,000 midwives for a population of 7 million to serve women of childbearing age.5 At the end of 2019, there were **949 midwives** trained by the three midwifery schools.

ACTION

• Through the SLiSL programme, support is being provided to improve pre- and in-service training, preceptorship and mentoring of midwives, to establish a strong and skilled workforce capable of reducing maternal, neonatal and child mortality.

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4. Secondary Data Analysis of 2017 EmONC data on MHCH for Centres of Excellence selected facilities
5. UNFPA Sierra Leone, National Nursing and Midwifery Strategic Plan 2019-2023.
Quality of care

Quality of care is the extent to which health care services provided to individuals and patient populations improve desired health outcomes. Improving quality of care and patient safety are critical to accelerating reductions in maternal and newborn mortality.

**FACT**

- Poor quality of maternal and neonatal health and nutrition services is a significant issue in Sierra Leone, in part due to the protracted civil war followed by the Ebola outbreak.

**ACTION**

- Through the SLiSL programme a quality of care framework for reproductive, maternal, newborn, child and adolescent health including nutrition has been developed and is being implemented and monitored at all levels, including community.

Emergencies, disease surveillance, preparedness and response

Sierra Leone remains susceptible to public health emergencies and other disasters with considerable public health consequences, human and economic.

**FACT**

- The 2014–2016 outbreak of Ebola resulted in 14,124 total cases with 3,956 deaths. In 2017, the devastating landslide and flooding that occurred on the outskirts of Freetown left an estimated 1,141 people dead or missing.

**ACTION**

- Enhancement of disease surveillance and emergency preparedness
- Strengthening and maintenance of the public health surveillance system for early detection and timely response to priority diseases, conditions and events.

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7. Ibid.