COUNTRY PROGRAMME
ACTION PLAN

WOMEN'S REPRODUCTIVE
HEALTH CLUSTER
• Maternal and infant mortality rates remain among the highest in the world (1,100 per 100,000 live births)
• Acceptance of family planning services is still low despite recent doubling of CPR
• Unmet need for MNH services is about 76 per cent (SOWMY, 2014)
• Skilled birth attendance rate is 62 per cent inclusive of Maternal and Child Health Aides with a minimal number of midwives
• Unmet need for family planning at 28 per cent
• High teenage pregnancy (28%) and adolescent birth rates (125/1,000) contribute to 40% of maternal deaths.
• At least 25% of maternal deaths are due to unsafe abortion.
STRATEGY

To address and improve the RH situation, UNFPA will support GoSL and partners to:

⇒ create an enabling environment for the delivery of Family Planning and Maternal Health Services

⇒ Strengthening health systems for the provision of quality Emergency Obstetric and New-born Care support improvement

⇒ Human resources capacity development for the delivery of Family planning and other health service delivery.

⇒ Building capacity for commodity security and logistics management systems
“Increased availability and use of integrated sexual and reproductive health services, including family planning, maternal health and HIV that are gender-responsive and meet human rights standards for quality of care and equity in access”
Three outputs will contribute to achieving this outcome:

- “Increased national capacity to deliver integrated sexual and reproductive health services, including in humanitarian settings”
- “Increased national capacity to strengthen enabling environments, increase demand for and supply of modern contraceptives and improve high-quality family planning services that are free of coercion, discrimination and violence”
- “Increased national capacity to deliver comprehensive high-quality maternal health services, including ending mother to child transmission of HIV (eMTCT) services”
OUTPUT 1

Increasing national Capacity to deliver Integrated SRH services:

- The **development and review** of integrated sexual and reproductive health national policies
- Conduct **training of trainers (TOT)** on protocols and national roll out
- Conduct **assessment on the availability and readiness** of integrated family planning services,
- **Disseminate findings** and inclusion of family planning modules into various training curricula.
**OUTPUT 2**

Strengthen enabling environments, increase demand for and supply of modern contraceptives

- **Promoting advocacy** for creating an enabling environment in support of family planning and other reproductive and maternal health services

- Increasing knowledge of sexual and reproductive health issues; using **demand generation** and **behaviour change communication**

- Building capacity for **commodity security and logistics management systems**

- Building **human resource capacity** to fulfil demand for family planning, as well as **inclusion of family planning modules** in curriculum of midwifery and MCH Aide education

- **Integrating family planning** into other sexual and reproductive health services
OUTPUT 3

Deliver comprehensive high-quality maternal health services

- **Strengthening health systems** for the provision of quality Emergency Obstetric and New-born Care

- **Institutionalizing of the Maternal Death Surveillance and Response (MDSR) system.**

- **Human resources capacity development** for health service delivery

- Strengthening **obstetric fistula prevention**, treatment and social reintegration through awareness-raising

- **Integrating** the management and prevention of **sexually transmitted infections**
INDICATORS & MOVs

• Number of national plans, guidelines, protocols and standards for the delivery of high-quality sexual and reproductive health services, including humanitarian response plan incorporating minimum initial service package

• Number of costed integrated national sexual and reproductive health action plan.

• % of service delivery points offering at least three modern methods of contraceptives

• Number of couple of years of protection (CYP) provided with UNFPA support

• Proportion of service delivery points covered by midwives

• Proportion of tertiary level facilities providing comprehensive emergency obstetric and neonatal care.

• Proportion of facilities with integrated services.
THANK YOU

WOMEN’S REPRODUCTIVE HEALTH CLUSTER