### Towards poverty eradication

Working in partnership to improve sexual and reproductive health and rights



## **Shared vision**

UNFPA, the United Nations Population Fund and IPPF, the International Planned Parenthood Federation share a vision – to improve the sexual and reproductive health and rights of women, men and young people around the world. UNFPA directly supports governments while IPPF provides comprehensive services at the community level and holds a strong civil society presence.

The different approaches of the two organizations complement each other and harmonize to ensure that all people everywhere, especially poor and socially excluded groups, can access sexual and reproductive health services to realize their human rights and improve their health and well-being. In many countries around the world, UNFPA and IPPF Member Associations work in partnership to bring the services and information to the people who need them.

The European Union (EU) is committed to the implementation of the Programme of Action that was adopted at the International Conference on Population and Development (ICPD) in 1994. This commitment has been reaffirmed in the *European Consensus on Development*, adopted in 2005, which states the EU's commitment to the ICPD Programme of Action in the context of poverty eradication and human development.

The member states of the African, Caribbean and Pacific (ACP) Group of States are also committed to the ICPD Programme of Action. The *EU-ACP Cotonou Agreement*, which provides the basis for the European Development Fund, commits to "integrating population issues into development strategies in order to improve reproductive health, primary health care, family planning; the prevention of female genital mutilation; and promote the fight against HIV/AIDS." In addition, the *Joint Africa-EU Strategy*, adopted in December 2007, spells out the EU's and African countries' commitment to support the ICPD agenda.

In 2002, at a time when a change in political leadership led to the loss of funding from a major non-European donor for both IPPF and UNFPA, the European Commission (EC) and the ACP Group of States put their commitment into action and agreed to fund a joint UNFPA-IPPF programme of sexual and reproductive health services in ACP countries. The purpose of the grant was to consolidate and expand sexual and reproductive health services in 22 countries. A total of  $\in 30$ million from the 8th European Development Fund was awarded, with €10 million going to IPPF and €20 million to UNFPA. The programme ran from January 2003 until October 2008.<sup>1</sup>

The IPPF component of the programme supported projects in 13 ACP countries which are among the poorest in their respective regions: the Republic of Congo (Congo Brazzaville), the Dominican Republic, the Gambia, Haiti, Lesotho, Madagascar, Mauritania, Nigeria, Rwanda, Sierra Leone, Sudan, Tuvalu and Zambia. These countries all fit into a similar demographic profile characterized by a young population, high fertility and high maternal mortality rates.

The UNFPA component of the programme supported 10 countries that face important challenges in the areas of maternal mortality, adolescent and youth health, and the prevention of HIV/AIDS and other sexually transmitted infections: Burkina Faso, Equatorial Guinea, Ethiopia, Ghana, Guinea-Bissau, Jamaica, Niger, Rwanda, Suriname and Tanzania. Projects were designed from the outset to be integrated into public health systems and to be aligned with national priorities and country contexts.

This publication is designed to give a comprehensive overview of the programme activities and outcomes in each of the 23 project locations. The 23 country sheets highlight key statistics, achievements and lessons learned from each project. This overview leaflet explains in more detail the overall objectives and results from both the IPPF and UNFPA components of the programme.

1 The project was initially for a period of 42 months but was extended in 2006 following the recommendations of a mid-term review of the programme.

# Working in partnership

#### IPPF, the International Planned Parenthood Federation

The International Planned Parenthood Federation is the world's largest provider and advocate for sexual and reproductive health services. IPPF has 148 Member Associations working in 159 countries worldwide. Approximately 36 million client visits a year are made to over 58,000 IPPF service delivery facilities around the world.

IPPF is a worldwide network of national organizations that are run by and for local people who understand the needs of their fellow citizens and families.

IPPF has a unified Secretariat, which consists of the Central Office in London and six Regional Offices based in Brussels, Kuala Lumpur, Nairobi, New Delhi, New York and Tunis. IPPF's unique structure is recognized internationally for its ability to ensure accountability, to demonstrate achievements, build capacity and to maintain a good quality of care across the network. All IPPF Member Associations are united by core values, shared principles and policies, and a strong sense of solidarity. They work within their national contexts to realize sexual and reproductive health and rights. This is achieved through a combination of providing information and services alongside targeted advocacy.

IPPF works towards a world where women, men and young people everywhere have control over their own bodies, and therefore their destinies. A world where they are free to choose parenthood or not; free to decide how many children they will have and when; free to pursue healthy sexual lives without fear of unwanted pregnancies and sexually transmitted infections, including HIV. A world where gender or sexuality are no longer a source of inequality or stigma. IPPF works to safeguard these important choices and rights for current and future generations.

IPPF – From choice, a world of possibilities.

#### UNFPA, the United Nations Population Fund

UNFPA, the United Nations Population Fund, is an international development agency that promotes the right of every woman, man and child to enjoy a life of health and equal opportunity. UNFPA supports countries in using population data for policies and programmes to reduce poverty and to ensure that every pregnancy is wanted, every birth is safe, every young person is free of HIV/AIDS, and every girl and woman is treated with dignity and respect.

UNFPA, which became operational in 1969, is the world's largest multilateral source of funding for population and reproductive health programmes. The Fund works with governments, at their request, through its network of country and regional offices, and aims to build national capacity. UNFPA multiplies its effectiveness by working in close coordination with other United Nations agencies and through partnerships with non-governmental organizations, faith-based groups, foundations, donors and the private sector.

In 2008, UNFPA worked in 158 countries, areas and territories through its headquarters in New York and five regional, six sub-regional and 115 field offices worldwide. UNFPA also has liaison offices in Brussels, Copenhagen, Geneva, Tokyo and Washington, D.C. UNFPA has decentralized its programmes to bring staff closer to clients. As a result, about three-quarters of UNFPA's 1,119 staff members work in regional, sub-regional or country offices.

UNFPA promotes the right of all individuals to develop to their fullest potential. To exercise this right, all people, but especially women, need access to reproductive health information and services, including family planning and sexual health, to enable them to make informed and voluntary choices and decisions.

UNFPA – because everyone counts.

### **Commitments into action**

#### **IPPF** key achievements

The programme focused on three main strategic areas to improve sexual and reproductive health in the project locations. Firstly, to increase geographical coverage with regard to sexual and reproductive health through the upgrading of existing structures and the establishment of mobile teams and community-based programmes. This enabled a better distribution of facilities according to population needs and allowed remote and hard-to-reach groups to be reached.

Secondly, to increase access to information and awareness of sexual and reproductive health issues, including HIV/AIDS prevention, among the target population especially young people. All projects had a strong component of information and awareness raising as part of a targeted effort to bring about behaviour change and increase service uptake.

Finally, the project sought to increase national capacities, including the improvement of technical and managerial skills of the personnel involved in the programme, as well as the organization and functioning of Member Association management systems. Campaigns, dissemination of focused information, education and communication materials, debates and rallies drew the attention of policy makers and led to their public support of sexual and reproductive health and rights. This helped to mobilize public opinion and inform people of the services made available through the projects.

#### QUANTITATIVE

Through clinics, youth centres and community networks built up with EC/ACP support, IPPF Member Associations were able to:

- provide 178,335 service users with modern family planning methods for the first time
- provide 1,454,298 non-family planning sexual and reproductive health services
- distribute 5,735,995 condoms
- provide 190,333 couple years of protection to service users

Targeted information and awareness campaigns were conducted in all 13 countries and Member Associations were able to:

- reach 1,661,364 people with sexual and reproductive health information
- produce and distribute 558,870 information, education and communication resources

The technical and management capacity of the 13 Member Associations was strengthened through:

- training 3,416 community workers and peer educators to work in their communities, distributing condoms, raising awareness and referring clients to static clinics for services
- specialized training of 746 health care providers to carry out sexual and reproductive health-related services

#### QUALITATIVE

Key achievements include the following:

- access to services for disadvantaged and marginalized groups has been widened
- community participation has been at the centre of country projects
- partnerships between IPPF Member Associations, governments and stakeholders have been strengthened

#### **UNFPA key achievements**

The programme's key focus was on three fundamental health challenges: maternal mortality and morbidity, adolescents and youth sexual and reproductive health, and sexually transmitted infections, HIV and AIDS. Its principal strategy centred on the development of sustainable national capacities to operationalize reproductive health and rights, especially at decentralized and local levels, including community mobilization and public sector partnerships with civil society and the private sector.

The programme supported the provision of training, technical assistance, community mobilization, procurement of medical and non-medical equipment, supplies and contraceptives, materials development, participation and social mobilization, and related activities. It achieved this through initiatives aimed at strengthening country health care systems for better service delivery – renovating/building health facilities infrastructure, and improving the capacity of managers, health service providers and communities to become more proficient at developing and implementing activities to reduce maternal mortality and to combat sexually transmitted infections and HIV and in integrating reproductive health training modules into the curricula of health training institutions.

#### QUANTITATIVE

The programme contributed to improvements in national capacity and the policy/legal environment in the area of sexual and reproductive health through:

- development of 29 sexual and reproductive health clinical protocols, norms and guidelines
- institutionalization of 27 sexual and reproductive health training modules/curricula
- 48 sexual and reproductive health operational research and other studies
- support for the development/adoption of 30 national laws, strategic policy documents and plans of action

Increased access to sexual and reproductive health services was achieved through:

1,805 existing health facilities

Increased awareness of sexual and reproductive health issues was achieved by:

- training 21,582 non-medical personnel on sexual and reproductive health
- reaching out to more than two million young people with sexual and reproductive health information

#### QUALITATIVE

Key achievements include the following:

- broader access to quality sexual and reproductive health information and services, particularly for young people
- promoting an enabling environment for improved sexual and reproductive health-seeking behaviour

Overall, the programme contributed to increased sexual and reproductive health service utilization and improvements in key reproductive health indicators, including skilled attendance at birth, better antenatal and post-natal coverage, fewer teenage

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