

# **Sexual and Reproductive Health and Rights (SRHR) in WHO African Region**

The SRHR Initiative: Supporting Country Strategies to Reduce Maternal Mortality and achieve SDG targets through a Health Systems Approach





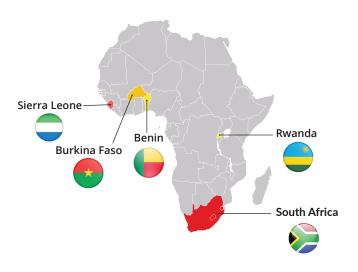
Initiated in January 2019 and scheduled for an initial four-year term, the SRHR Initiative aims to help recipient countries in the AFRO region to reduce maternal mortality through strengthening the health systems to address SRHR challenges and contribute to achievement of Universal Health Coverage (UHC). It places emphasis on eliminating maternal deaths due to unsafe abortion, which is of importance in the African Region, and increase access to contraception. The initiative also focuses on strengthening the health system, including enhancing governance, building human resource capacity, availability and accessibility to essential medicines, analyzing the responsiveness of health services and monitoring maternal deaths, and health information. Strengthening health systems is key to improve sexual, reproductive health services and ultimate reduction in maternal mortality and morbidity.

Participating countries were selected based on well-defined criteria, including the high rate of maternal mortality, the high rate of unsafe abortions, the clear political will and commitment to end preventable maternal deaths.



## What are the focus countries of the project in the African Region?

The SRHR Initiative is implemented in five countries in the African Region.



Other countries beyond the five focus countries can be supported by this initiative upon request.

## What is expected to be achieved?

The Initiative is expected to achieve the following results:



An enabling national policy environment for SRHR



Strengthened health workforce to deliver quality and peoplecentered SRHR services



Health information system strengthened to tracks key

SRHR indicators



**Essential SRH** medicines quality-assured, financing accessible



National health mechanism covers SRH SRHR



National emergency response includes

#### What are the results attained so far?

After two years of implementation, the Initiative has enabled some countries to develop policy briefs and advocacy for SRHR (including on integration of SRHR into UHC/National Health Insurance/ PHC) and capacity building, through the national dissemination and orientation of WHO guidelines on Safe Abortion and self-care interventions for health. Focus countries also updated and disseminated SRHR guidelines, protocols, operational tools, training manuals with a focus on safe abortion and family planning, conducted assessments on national capacity for training in SRHR, strengthened Ministry of Health coordination of SRHR partners and initiatives, strengthened multi-sectoral partnerships to enhance SRHR including guidance documents for operationalization of national abortion laws. The initiative conducted two rapid assessments to monitor the continuity of essential SRHR services during the COVID-19 pandemic that permitted to have an overview of the situation of SRHR service delivery during the COVID-19 pandemic. Furthermore, the

rapid assessments provided evidence to mobilize resources and advocacy actions to integrate and maintain SRHR services in the national plans for continuity of Essential Health Services (EHS).

Additionally, through the SRHR Initiative, the WHO African Region now has a regional scorecard to monitor progress in Sexual and Reproductive Health. The Regional Office (AFRO) has successfully conducted several regional workshops to orient stakeholders on WHO SRHR guidelines and recommendations for safe abortion, contraception and selfcare and successfully developed a regional SRHR priority research agenda. AFRO has also successfully established regional RMNCAH Technical Advisory Group (RMNCAH TAG) which commenced its duties in 2020 to advise the Region on how to support progress towards ending preventable maternal and child deaths and improve sexual and reproductive health and rights.

#### Outstanding achievements presented by the four countries include:



In Benin, 283 pharmacists and people responsible for epidemiological surveillance have been trained in the recording and evaluation of adverse drug reactions resulting from the use of drugs including those for abortion-related services (pharmacovigilance)



Ministry of Health Burkina Faso was supported in the development of national guidelines for caesarean section practice and monitoring tools with the use of the Robson index. Also, the joint country assessment of continuity of sexual and reproductive health services during the COVID-19 period in the five regions affected by the humanitarian and the public health crises permitted

to mobilize funding in a short period for the installation of solar panels for a center to house the blood bank in Dori, the purchase of a generator, and the construction/rehabilitation of 11 advanced health posts in the Sahel region – all these will contribute to improving the provision of reproductive and maternal health services in these difficult-to-reach parts of the country



In Rwanda, Post Abortion Care training manual was updated and disseminated to 299 clinicians



In South Africa, the national consolidated Sexual and Reproductive Health Policy was developed and disseminated at national level. Also, the Termination of Pregnancy (ToP) Act Clinical Implementation Guideline has been finalized and disseminated. Finally, WHO is supporting the continuity of essential SRHR services in the context of COVID-19 through routine data analysis of SRHR services for advocacy



### For more information please visit:

https://www.afro.who.int/health-topics/ sexual-and-reproductive-health

