

FACT SHEET SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

High fertility rates and unwanted pregnancies, including high rates of adolescent fertility, contribute to preventable deaths and illness among mothers and their newborns, and influence the wellbeing of women, children and adolescents. Sexual and reproductive health and rights (SRHR) have been identified as a priority within the reproductive, maternal, newborn, child and adolescent health and nutrition (RMNCAH-N) continuum in all the 26 current Global Financing Facility (GFF) countries.





Photo by Dominic Chavez

GFF'S CONTRIBUTION TO SRHR

The GFF brings a systems approach that adds value to the efforts of other development partners. The key tool used by the GFF is a country-led "investment case," which identifies high priority interventions and key bottlenecks for efficient service delivery, and the investments required to achieve results. The investment case process starts with assessment of the disease burden and other available data through an equity lens, focusing on geographical areas that are lagging behind; the neglected periods of life, such as the early years or adolescence; and, key interventions that have been underinvested in, such as family planning. As a result, SRHR (including family planning) has been prioritized in every investment case completed to date.

Concurrently, the GFF plays a role in helping countries identify program and finance reforms and funding mechanisms needed to ensure scaled and sustainable financing for the investment case including SRHR, in consultation with key stakeholders and affected populations (such as youth). Once priorities are defined, the GFF focuses on coordinated financing and implementation (e.g., with other sectors, private enterprises, etc.), which includes an emphasis on improved efficiency, increased domestic and private sector resources, better aligned external financing, and linking GFF Trust Funds with IDA and IBRD. For example, Mozambique's investment case process has resulted in a clear vision for which strategies to pursue to achieve its RMNCAH-N outcomes, with a strong focus on 42 priority districts that are lagging but have high potential for results. The resulting investment case recommends an expansion of the country's community health workers program, investments to improve quality of care in selected district hospitals and primary care centers, and the targeting of family planning services for adolescents through different strategies including school-based service delivery and private provision.



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GFF improves access to sexual and reproductive health (SRH) services through a systems approach, combining direct and indirect pathways.

DIRECT PATHWAYS

• **Dedicated interventions:** The GFF directly supports the delivery of dedicated SRH interventions, for example, the procurement of contraceptives, alignment of specialty family planning providers, and support for demand-side efforts and use of SRH services.

• **Integrated delivery:** Ensuring SRH services are included in essential benefits packages and integrated into performance-based financing systems and the delivery of SRH services through existing touch points, for example, post-partum family planning, post-abortion care, and HIV-focused interventions.

• **Multi-sector investments**: The GFF also makes direct, non-health sector investments in areas such as education and social protection to address non-health determinants of SRH outcomes.

INDIRECT PATHWAYS

• Health systems strengthening: The GFF helps create stronger, more resilient health systems to indirectly support SRHR through horizontal investments in supply chains, health management information systems, human resources, improved governance, and public financial management.

• Health financing reforms: Support for reforms to increase the share of total government health expenditures to promote domestic resource mobilization and financial sustainability for RMNCAH-N and universal health coverage has important indirect benefits for SRHR.

Experience gained over the GFF's first two years shows that countries are prioritizing SRH education and services in their investment cases and their GFF Trust Fund and IDA/IBRD investments, for example:

• **Democratic Republic of Congo:** The Democratic Republic of Congo is focusing on improving the coverage of quality and equitable RMNCAH-N information and services and strengthening management systems. Family planning and other SRH interventions are integrated in the RMNCAH-N package and focus on strengthening the supply and distribution of family planning inputs; integrating family planning services in post-partum care and scaling up SRH services at the clinical and community levels; and providing youth-friendly services.

• **Bangladesh:** Through the GFF, Bangladesh is working across sectors to stem early marriage and early pregnancies to reduce maternal and neonatal deaths and improve the health and wellbeing of adolescents. The country directs its investments toward the education sector, to reduce drop out among female & disadvantaged students, by providing for example: stipends for female students; SRHR and gender equity in curriculum; adolescent health services; and, menstrual hygiene, basic sanitation and nutrition services for girl students in schools and in communities. Together these interventions will help keep girls in school, delay the age of marriage and postponing the timing of their first birth to increase the chances of survival for both mother and child.

• **Liberia:** The country is focusing on counties with the highest RMNCAH-N burden, with the goal of delivering quality emergency obstetric and neonatal care and enhancing service delivery at the community level. To more effectively reach adolescents, Liberia is expanding the package of services available at health facilities and through community health services to offer a comprehensive "one-stop" approach, including family planning services and safe-sex information.

OPPORTUNITIES TO EXPAND THE BENEFITS OF SRHR

There is considerable scope to expand the GFF's work on SRHR. Several eligible countries have expressed interest in receiving support from the GFF Trust Fund, and those already among the 16 GFF countries would benefit from further efforts to enhance SRHR. The GFF is exploring opportunities to leverage IDA18 funding to expand work across RMNCAH-N and close gaps, particularly in fragile environments. Countries in West Africa are very interest in joining the GFF, since many of them receive disproportionately low levels of external support for RMNCAH-N, despite high needs among growing populations, especially adolescents. New partner investments during the GFF's 2017-2018 first replenishment will support the smart, sustained and scaled financing for RMNCAH-N across existing and new GFF countries, including strengthening SRHR and family planning financing, technical assistance, and service delivery.