

Reproductive Health and Population Programme, Yemen

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| Assignment | The overall objective of the project is to reduce the maternal mortality and under-five mortality rates, and to increase couple protection and attended delivery rates in three governorates. This will be achieved by building sustainable local capacity in the planning, implementation and monitoring of reproductive health programmes, the strengthening of health systems, and the effective advocacy and community based outreach programmes. |
| Client | Government of Yemen |
| Financing Agency | European Union (EU) |
| Partners | EPOS |
| Composition of Team | <i>BMB Mott MacDonald</i> : Team Leader; Key Expert Public Health <i>Partner(s)</i> : Key Expert Health Promotion |
| Period of Assignment | From April 2009 to December 2011 Staff months: <i>BMB Mott MacDonald</i> : 79; <i>Partner(s)</i> : 32 |
| Contract value | <i>BMB Mott MacDonald</i> : € 1,056,000 <i>Partner(s)</i> : € 712,100 |
| Background | <p>Yemen is a country emerging from a complex history. Although its economic progress has advanced significantly since the mid-1990s, Yemen remains one of the poorer countries in the world, with low ranking by the Human Development Index (155 out of 171, 2005). Consequently, the overall health system has suffered, which has led to poor coverage and quality of reproductive health services, affecting the reproductive health of the population.</p> <p>Recognising the importance of health services in both economic and social development, the Government of Yemen has embarked on a series of initiatives to both improve the reproductive health of its population and to strengthen health systems, among other things through this Reproductive Health Programme (RHPP), which will take place in the governorates of Taiz, Lahj and Hodeidah.</p> |
| Description of project | <p>The aim of the project is to improve accessibility, effectiveness, quality and awareness of reproductive health services in the governorates of Taiz, Lahj and Hodeidah.</p> <p>Expected outputs are:</p> <ul style="list-style-type: none">i) Improved geographical accessibility to RH services in the targeted governorates by increasing the physical infrastructure;ii) Improved financial accessibility by expanding social protection and availability of financial resources for RH services in the targeted governorates;iii) Improved accessibility of RH by increasing the availability of appropriately functioning RH human resources;iv) Improved accessibility of RH by increasing the availability of an effective evidence-based essential package of RH services (including |

EmOC) through both public and private service providers;

- v) Improved effectiveness of RH services through improved capacity in the planning and management of RH services at governorate and district levels;
- vi) Improved quality of RH services;
- vii) Improved awareness among the population of reproductive health issues in the targeted governorates.

Services provided

The services provided encompass:

- i) Infrastructure: development of a plan for the governorate, identifying priority needs for rehabilitation, extension and new facilities and implementation of these needs through partnership with the Social Fund Development;
- ii) Social protection and finance: establishment of an exemption scheme for the poor and exploring other innovative financing options;
- iii) Human resources: increase in the availability of quality-skilled birth attendants and Emergency Obstetrical Care, trialling the contracting of professional staff on a short- or long-term basis and performance based incentive schemes;
- iv) Private and public service providers: improvement of accessibility to a basic essential service, strengthening partnerships between private and public actors, testing innovative RH service delivery strategies, implementing effective referral systems and establishing mechanisms for reviewing these systems;
- v) Institutional strengthening: strengthening of planning, budgeting skills, supportive supervision capacity, monitoring schemes and peer review at governorate and district level, design of strategies, best-practice protocols, and methods with different stakeholder groups;
- vi) Quality assurance: development of a quality assurance system by supporting continuing training programmes of RH professionals, reinforcement of mortality audits and their translation into preventative action and undertaking of regular customer satisfaction surveys;
- vii) Public awareness: conduct knowledge, attitudes and practice studies, development and implementation of a health awareness and education strategy, integration of HIV/AIDS/STD prevention through counselling and testing across governorate levels and development of community support mechanisms for families of HIV/AIDS patients.

Lessons Learned

Excellent proposal written by Anna Vassall.