



# PROMOTING SEXUAL & REPRODUCTIVE HEALTH AND RIGHTS IN FRAGILE SETTINGS

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## SRHR IN FRAGILE SETTINGS

Access to sexual and reproductive healthcare is an integral element of everyone's right to pursue the highest attainable standard of physical and mental health and well-being. The United Nations' Sustainable Development Goals (SDGs) have explicitly recognised sexual and reproductive health and reproductive rights as essential not only to health but also to gender equality and wider economic and social development.

Health systems should guarantee access to quality Sexual and Reproductive Health (SRH) services to reduce the number of non-desired and higher-risk pregnancies, sexually transmitted infections and HIV, as well as unsafe abortions and Sexual and Gender-Based Violence (SGBV).

In the Global South youth comprise a large part of the population; Sub-Saharan Africa has the world's highest proportion of youth aged 10-24 years (32%). However, these young people hardly have access to information and SRH-services. Besides economic and socio-cultural barriers, health facilities are often not youth-friendly and family planning is only available for married couples, whereas young unmarried people are not supposed to be using contraceptives. Youths feel shy and ashamed to visit SRH-services and if they do so they often face judgmental attitudes from healthcare providers. In addition, there is a big knowledge gap among youth, especially out-of-school youth.

In conflict-prone and fragile contexts access to information and quality SRH-services is often an extra challenge, while needs are higher as women and girls are more frequently confronted with SGBV.

In the area of SRHR (Sexual and Reproductive Health and Rights), Cordaid takes a holistic and transformative approach that considers health systems, communities, individuals, and societal/legal challenges.

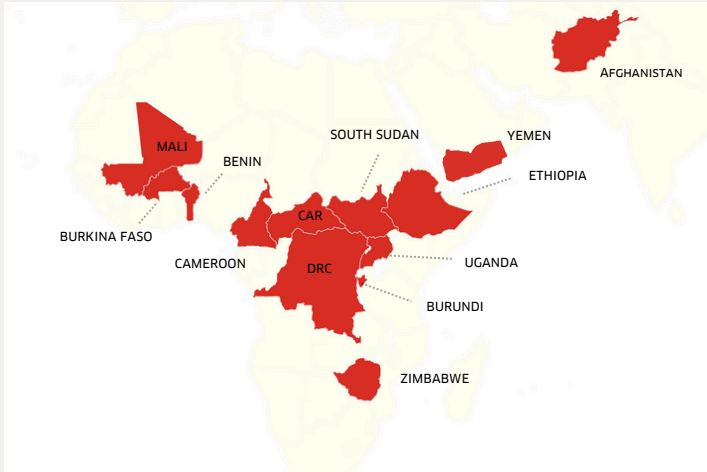
This includes:

- Strengthening health systems including capacity strengthening of health staff.
- Ensuring that all stakeholders, especially young women, participate and/or lead in all programme phases and capacitating them to voice their needs and stand up for their own rights.

Within this approach, Cordaid puts emphasis on:

- Promoting meaningful youth participation so youth is not seen as mere beneficiaries but as drivers of change.
- Addressing socio-cultural and institutional norms to enable equitable access to SRH-services for women, adolescents and other key populations regardless of their social or health status, age, gender, or sexual orientation.
- Advocating for inclusive SRHR policies that reflect local needs.
- Prevention of SGBV and services for survivors of SGBV.
- Involvement of boys and men to ensure effective change.
- Stimulating dialogue with and involvement of religious leaders.
- Facilitating social entrepreneurship to increase availability of SRH-commodities.

## CORDAID SRHR PROGRAMMES 2015-2025



### KEY FIGURES

Our key results for 2023 included:

- 448,000 people using family planning methods
- 125,000 women who had at least four antenatal care visits
- 3.4 million people tested for HIV
- 52,000 GBV cases receiving care within 72h
- 377 health facilities with improved quality

Below we present a selection of our SRHR programmes divided in sub-themes.

### What is RBF?

We strengthen healthcare systems to improve health services by applying the RBF (Result Based Financing) approach. This capacity strengthening and financing mechanism improves the performance of healthcare facilities and local health authorities by incentivising pre-determined results.

1. A business plan is developed by the health facility staff with the involvement of the community.
2. Facilities sign contracts with the Performance Purchasing Agency (PPA).
3. Each month the accuracy of health data reported by each health facility is verified by the PPA.
4. Health facilities are also rewarded for the quality of care which is measured quarterly.
5. The health facilities are paid on a quarterly basis based on the verified services by a Fund Holding Agency and spend this income in line with their own business plan.

RBF strengthens highly deprived health facilities to provide quality services, while also motivating health staff. Our RBF programmes embed innovative digital solutions to promote data-driven decision-making and enhanced transparency and consistency.

### HEALTH SYSTEMS STRENGTHENING

#### ■ RBF in Ethiopia, Zimbabwe and Burundi

The goal of the Results-based financing (RBF) programme in Zimbabwe, Ethiopia and Burundi is to improve the availability and accessibility of quality reproductive healthcare services. The funding partners are the Dutch government (in Ethiopia), the World Bank (in Zimbabwe), and KfW (in Burundi). The implementation of RBF in Ethiopia in Borana (9 million Euro, 2014-2026) and Jimma Zone (20 million Euro, 2019-2026) has resulted in markedly increased service utilisation by pregnant

women and improved data quality for SRHR indicators such as women having access to family planning and women delivering in health facilities.

In Zimbabwe, the RBF programme (78 million USD, 2011-2024) covered one-third of the districts and contributed to increased utilisation of maternal, new-born and child healthcare services (from 11% in 2012 to 29% in 2023), including an increase in deliveries in health facilities. In Burundi, Cordaid implemented a 23 million Euro programme between 2018 and 2024 covering 3 provinces benefitting 1,7 million people with improved health services in 151 health centres.



Photo Adriana Parejo Pagador



■ **System strengthening for HIV and TB in DRC and South Sudan**

Cordaid served first as a sub-recipient and then as the principal recipient of the Global Fund against HIV, TB and malaria in DRC (2012-2024, 529 million USD), supporting HIV and TB diagnostics, warehouses and distribution chains in the most remote and difficult to access communities. In the last years of the program, we distributed HIV medication and tests to more than 4000 facilities. Please see the extent of this logistical operation in [this short video](#).

In South Sudan, Cordaid supports the provision of HIV and TB care in 197 health facilities.

■ **Midwifery training programmes in the Sahel region**

A series of capacity-strengthening workshops for over 200 teachers and 600 students of several midwifery schools in Mali and Burkina Faso took place during two project cycles funded by Nuffic in the period 2019-2022. The national curriculum was complemented with different pedagogic techniques equipping teachers to run skills labs and build practical skills of students. The sustainability of the project was facilitated by an online free-of-charge exchange platform (Padlet) hosted by one of the midwifery schools.

■ **Joint partnership on SRHR in Burundi (TUBAKARORERO)**

The Tubakarorero project is a joint effort of 3 international and 3 Burundian agencies supported by the Dutch government (2022-2025, 4 million Euro). The project aims to create more demand for family planning methods by sensitising households and members of credit groups, training health coaches and engaging religious leaders in 6 provinces of Burundi. Young people are also trained in entrepreneurship, and some become youth ambassadors and volunteers to reach even more youngsters.

**SGBV**

■ **SGBV and SRHR in DRC (North- and South Kivu)**

The S3G project in DRC is a partnership between Cordaid and HEAL-Africa, funded by the Dutch government (2020-2027, 18 million euros). The project provides a holistic response to SGBV. The 3 main objectives of this project are:

- 1) Strengthening the response to SGBV through one-stop centres, focusing on empowering survivors and building their resilience. The project has shown that 92% of SGBV survivors benefit from holistic assistance based on their specific needs: Mental Health and Psychosocial Support (MHPSS), medical care and/or legal assistance.
- 2) Strengthening the health system by providing quality reproductive health services and improved supply chain management for reproductive health and family planning products. More than 80% of the health facility staff improved their knowledge of adolescent-friendly SGBV services and 95% of the target group consulted family planning and contraception services.



3) Localisation, through improved governance in the fight against SGBV and the transformation of social and cultural norms to promote gender equality. The first phase has shown that 100% of the involved stakeholders in the fight against SGBV take initiatives to promote gender equity through coordinated actions.

■ **GBV integrated into a community-based MHPSS programme in Afghanistan**

In Afghanistan, comprehensive community-based mental health and psychosocial support (MHPSS) and Physical Rehabilitation services for hard-to-reach and vulnerable populations are supported by the Dutch government (2023-2025, 4,7 million Euro) and endorsed by the authorities. A consortium of three local NGOs targets 50,000 people with restricted mobility and persons suffering from mental and/or physical trauma in four provinces of Herat, Dikundi, Khost and Nanagarhar. The focus is on Community MHPSS with a network of trained community-based MHPSS counsellors, with a special focus on survivors of GBV, youth and persons with a disability.

**YOUTH**

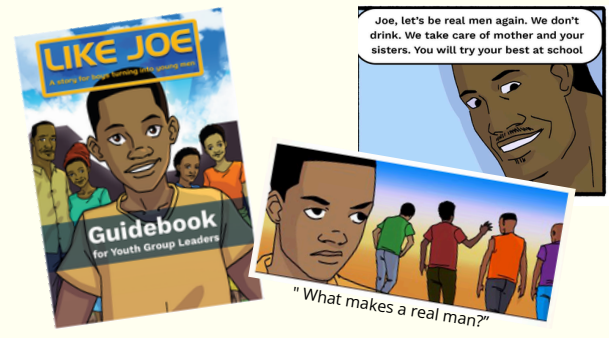
■ **Adolescent SRHR project in four districts of Mali (JIGIYA)**

Implemented since 2019 by the consortium of CAEB (a Malian NGO) and Cordaid, supported by the Dutch government (2019-2027, 1,1 million Euro), the JIGIYA programme in Mali improves adolescent and youth reproductive health and their rights to voluntary choice for contraception and protection against HIV. The ultimate goal of the programme is to reduce maternal and neonatal mortality. The programme focuses on comprehensive sexuality education, peer education activities and youth involvement for adolescent SRHR in 4 regions: Segou, Mopti, Koulikoro and Kayes. Thus far, the project has reached more than 1,3 million adolescents and young people with correct information on reproductive health, family planning and prevention of traditional harmful practices (female circumcision and child marriage). In addition, youth are made aware of the dangers of substance abuse, SGBV and violence related to extremism; 17 thousand income-generating activities were created by young people.



Photo Cordaid

**Like Joe: an Edutainment tool for promoting positive masculinities in anglophone and francophone countries**



This is a tool (cartoon and accompanying guidebook) developed by Cordaid, focusing on unmarried adolescent boys and young men. The main objective is to develop positive masculinities; to build positive identities, be gender sensitive and practice healthy behaviour. The story in the cartoon is developed by boys themselves. The guidebook contains 33 one-hour sessions, mixing storytelling, theatre, sports and games. Every session ends with a challenge, that can be either given as a take-away assignment or to be shared via WhatsApp. The tool is applied within the context of a number of different projects.

**OUR PARTNERS**

World Bank, the Global Fund to Fight AIDS, Tuberculosis and Malaria, the Bill and Melinda Gates Foundation, the European Commission, the German development bank KfW, the UN, the Dutch Ministry of Foreign Affairs and various Dutch embassies

**ABOUT CORDAID**

Cordaid is a value-based international development and emergency relief organisation, based in the Netherlands with offices in 14 countries. We work in and on fragility and support communities in their efforts to improve health care, education, food security, and justice. Where disaster strikes, we offer humanitarian assistance.

Cordaid is deeply rooted in the Dutch society with more than 250.000 private donors. The Christian values of human dignity, justice, compassion and care for the planet guide us in our work. Cordaid is a founding member of Caritas, CIDSE and ACT Alliance .

**CONTACT**

**Saskia Tamminga**  
Health Expert  
saskia.tamminga@cordaid.org

**Cordaid**  
Grote Marktstraat 45,  
2511 BH Den Haag  
+31(0)70 31 36 300  
[www.cordaid.org/en](http://www.cordaid.org/en)

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**Adolescent SRHR project in DR Congo, Central African Republic, Cameroon and Benin (Jeune S3)**

Cordaid has been the lead in the Jeune S3 Alliance with 9 partners which was funded by the Dutch government (2016-2020, 30 million Euro). It included youth empowerment, comprehensive sexuality education inside and outside schools, increasing access to youth-friendly health services and advocacy with national and local stakeholders. A wide range of educational materials was developed, which continue to be used and adapted by new programs of Cordaid such as S3G and Jigiya and local partners. These materials include training tools, and culturally sensitive and attractive SRHR education materials for youth (see cadre) translated in different languages. The programme also included entrepreneurial approaches to purchase self-care products or airtime; training of youth ambassadors and journalists; youth developing a series of radio programmes on comprehensive sexuality education; awareness raising and training of religious leaders on SRHR and advocating for better policies on youth SRHR.

Some of the Jeune S3 results are:

- 695,635 young people were reached (51 % girls);
- 164,210 young people received a family planning consultation (71% girls);
- 194,498 were tested for HIV (43 % girls);
- 140,809 received comprehensive sexuality education (33% girls aged 10-14 years);
- 52,153 reproductive services provided to young people (76% girls);
- 57,475 parents sensitised on young people's SRHR and engaged in important conversations with their children;
- 4,193 religious and traditional leaders sensitised on the importance of young people's SRHR;
- 1,682 young people involved in advocacy activities to become active leaders in their communities.