

From policy guidelines to capacity building of health staff

Improving sexual and reproductive health service delivery in Rwanda



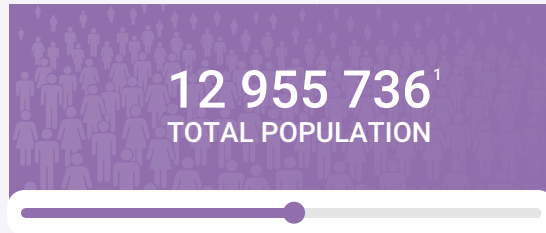
This case study was developed by the WHO country office with support from the Country Strategy and Support (CSS) and the Prevention of Unsafe Abortion (PUA) unit at UNDP-UNFPA-UNICEF-WHO-World Bank Special Programme of Research, Development and Research Training in Human Reproduction (HRP) Department of Sexual and Reproductive Health and Research (SRH). The work was undertaken as part of a collaborative project to address unsafe abortion through a health system strengthening approach. The project ran from 2019–2023 and included ten countries; three WHO regional offices; and five WHO HQ departments working together through a technical working group coordinated by HRP.



Background

Access to sexual and reproductive health and rights has been improving in the Republic of Rwanda since 2003, when health as a human right was enshrined in the Constitution. Additionally, revision of the law has made abortion legal in certain circumstances. *Vision 2050 – The Rwanda We Want* has also included reproductive health as one of the four priority areas for health.

Rwanda: Facts



57%²
Population aged below 15 years



2.58%³
Annual population growth rate



4.2 Children per woman
Total fertility rate⁴

Mortality



203 (per 100 000 live births)
Maternal mortality rate



19 (per 1000 live births)
Neonatal mortality rate

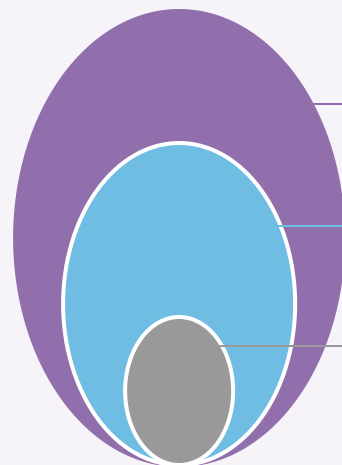


33 (per 1000 live births)
Infant mortality rate



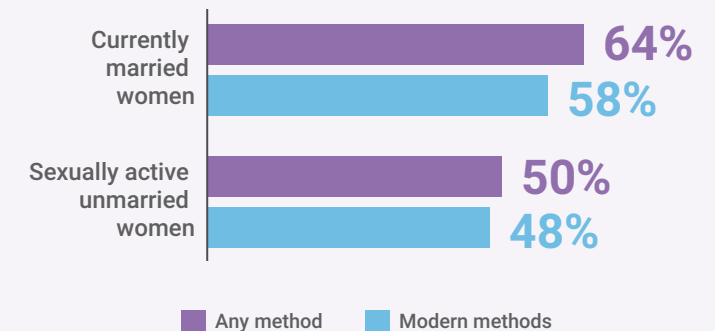
45 per 1000 live births
Under-5 mortality rate

Abortion⁵



Access to family planning services

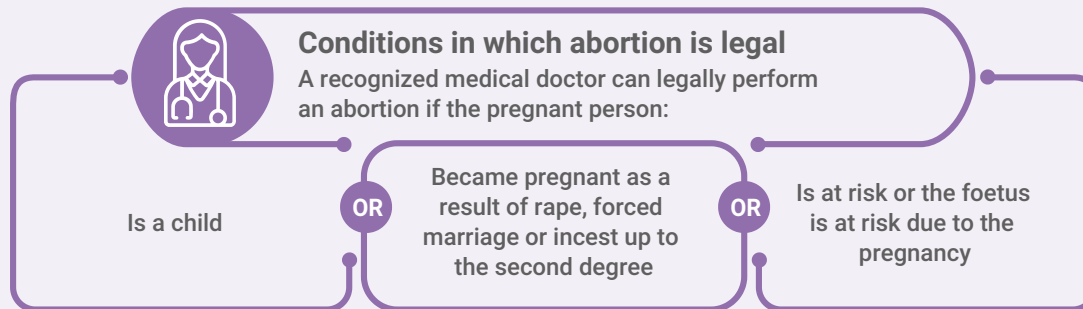
Contraceptive prevalence rate among women aged 15–49 years⁶





Status of abortion care services

In 2018, Law n° 68/2018 of 30/08/2018 of the Rwanda Penal Code was revised to make abortion in some situations legal. A Ministerial Order, N°002/MoH/2019 of 08/04/2019, in support of the revised Law, was also issued determining conditions to be satisfied for a medical doctor to perform an abortion. Exemption from criminal liability for abortion was assured to those following the provisions of the Law and Ministerial Order.



It is an important tool we sign to make sure that in the coming years we know what we are doing and which areas we want World Health Organization to make a difference in the support they are providing.

– Honourable Dr Daniel Ngamije,
Minister of Health

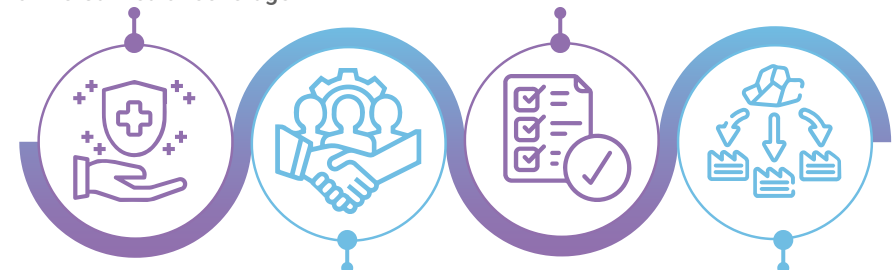
Strengthening the health system support for sexual and reproductive health through strategic plan review and development

SRH interventions are integrated into the national development strategies, including National Strategy for Transformation 1 (2018–2024), the National Health Sector Strategic Plan IV (2018–2024 and the Maternal Child Health and Family Planning and Adolescent Sexual and Reproductive Health strategies. In May 2021, the World Health Organization fourth Country Cooperation Strategy was launched providing a roadmap for World Health Organization support to the Government of Rwanda and aligned to the National Strategies and World Health Organization 13th General Programme of Work and Regional Transformation Agenda.

The Country Cooperation Strategy will contribute to:

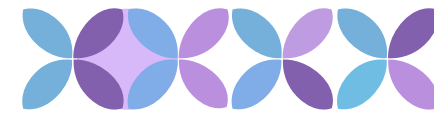
Improving access to quality essential health services, which include sexual and reproductive health, towards universal health coverage

Ensuring availability of standardized evidence based technical guidelines, norms and tools



Strengthening collaboration between government and related implementing agencies, United Nations agencies, development partners, professional associations and academic and research institutions

Mobilizing resources for priority areas

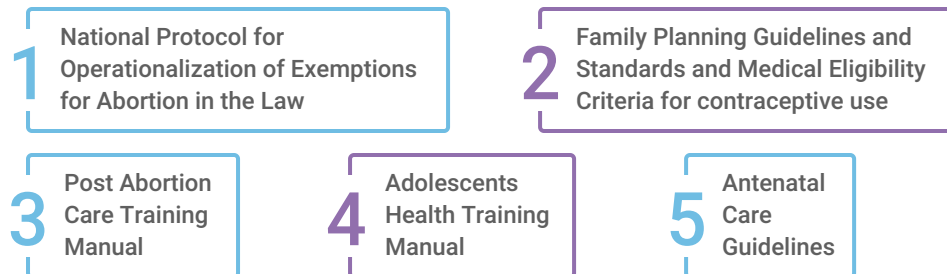


Interventions

Providing evidence-based technical guidance and capacity building for use, including availability of quality-assured medical services and products

To ensure standardized and quality service provision, World Health Organization supported the Ministry of Health in the following:

a) Reviewing and updating guidelines and training tools relevant to sexual and reproductive health, namely:

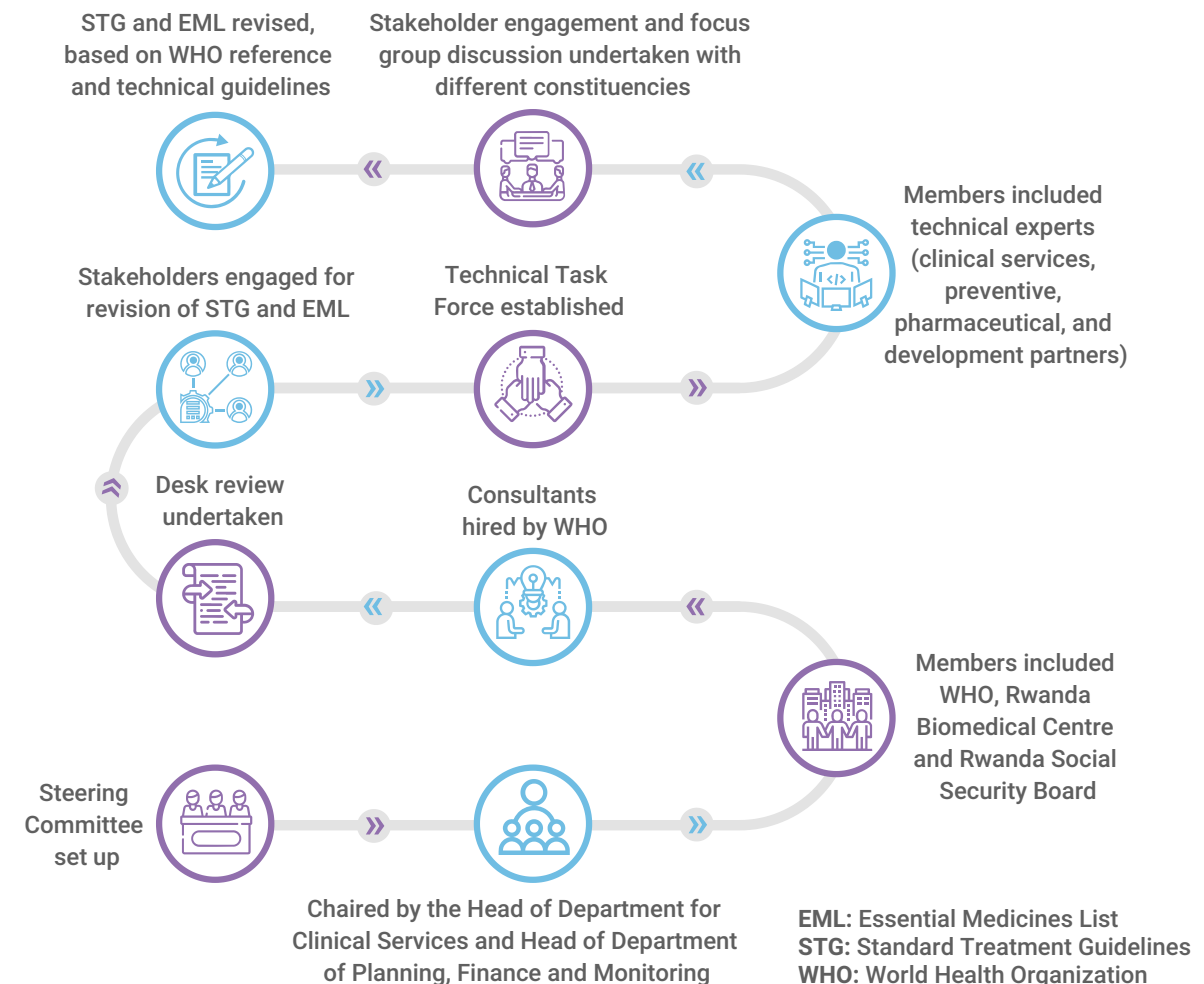


The products were developed in 2020 and 2021 and have been validated by technical working groups while awaiting approval from the senior management. Capacity of health-care providers was built on the use of the guidelines – Comprehensive National Protocol on Post-abortion Care, Safe Abortion Services, Postpartum Family Planning and Adolescent Sexual and Reproductive Health. A total of 500 health-care providers were oriented on the revised guidelines from district hospitals and health centres.

b) Updating the Standard Treatment Guidelines and developing a National List of Essential Medicines for adults in Rwanda

This is significant in promoting rational medicine use, ensuring availability of quality assured and registered medical products, and standardizing and optimizing patient care.

Update of Standard Treatment Guidelines and development of National List of Essential Medicines: The process





Strengthening maternal and perinatal death surveillance and response

To reduce maternal and child mortality, World Health Organization supported the Ministry of Health in undertaking maternal and perinatal death surveillance and response processes in Rwanda.⁸



Death audits were conducted for 1698 under-5 deaths, excluding neonatal deaths, and 269 of 284 notified maternal death cases.



In June 2021, the confidential inquiry into perinatal death was conducted, whereby all deaths that were reported in 2019 from all hospitals were reviewed and gaps identified. Recommendations for improving quality of review and reporting for maternal deaths were put in place. This will also contribute to monitoring of maternal deaths attributed to complications of abortion.



Supportive supervision was undertaken by the National Maternal and Perinatal Death Surveillance and Response Committee in 39 hospitals to ensure the implementation of death audit recommendations to improve quality of care for women and newborns.

Strengthened capacity for provision of quality family planning services

Family planning is a national priority for poverty reduction and socioeconomic development of the country. There has been progress in access to contraceptive use (currently at 58% for modern contraception use in 2020), increased demand for contraceptive use (from 50% in 2000 to 78% in 2020) and reduced unmet need (from 37% in 2000 to 14% in 2020).⁹ The initiative contributed to strengthening the capacity of health-care providers and system through training, mentorship and provision of medical eligibility criteria for contraceptive use tool to ensure informed choice.

Results of the initiative in provision of family planning services



Improved access to family planning information and services, including male involvement



Improved family planning service providers' knowledge and skills to provide quality family planning services

Conclusion

A combination of policy focus, capacity building of health staff and introduction of standardized guidelines is expected to improve delivery of sexual and reproductive health services for young people and ensuring the health and wellbeing of the women and girls of Rwanda.

¹ Rwanda Vital Statistics Report 2021: <https://www.statistics.gov.rw/publication/1705> | ² Ibid. | ³ Ibid. | ⁴ Demographic and Health Survey (DHS) 2019–20: <https://dhsprogram.com/pubs/pdf/FR370/FR370.pdf> | ⁵ Guttmacher Institute, Rwanda country profile, 2022, <https://www.guttmacher.org/geography/africa/rwanda> | ⁶ Demographic and Health Survey (DHS) 2019–20: <https://dhsprogram.com/pubs/pdf/FR370/FR370.pdf> | ⁷ Fourth Country Cooperation Strategy 2021–24: <https://www.afro.who.int/news/who-rwanda-launches-fourth-country-cooperation-strategy-2021-2024> | ⁸ Backward-Looking JSR Report for FY 2020/21: https://www.mininfra.gov.rw/fileadmin/user_upload/Mininfra/Publications/Reports/Transport/Transport_Sector_Backward_Looking_-_JSR_Report_FY_2020-2021.pdf |

⁹ Rwanda, Demographic and Health Survey (DHS) 19–20

