

## News from the Project RMA Bangladesh Logistics Committee Reconvened

The Ministry of Health and Family Welfare of the People's Republic of Bangladesh has approved the Terms of Reference for the Logistic Coordination Forum (LCF). [The Family Planning Association of Bangladesh](#) (FPAB) has been working with a wide range of stakeholders to advocate for the reactivation of the committee, that has not functioned since 2005. They received notification that the revival of the group had been sanctioned by the Ministry of Health in November 2008. The recent approval of the terms of Reference for the Committee is the final confirmation of its status as a legal entity.

Stakeholders have high hopes that the forum will help push contractive supply issues high up on the governments list of priorities. In related news FPAB are preparing for a high level launch of ground breaking research quantifying the economic impact of Reproductive Health (RH) supplies shortages. A preliminary review of findings indicates that shortages of RH supplies costs the national economy in excess of US \$15 million per year. The launch will be held in July in Dhaka. A wide range of donor, government and civil society stakeholders will convene to review the research and develop recommendations to take forward to decision makers.

For further information please contact [Sarah Shaw at IPPF](#).



## Supplies news Sexual and Reproductive Health and Rights in Zambia

An article by Amos Mwale, Executive Director of Youth Vision Zambia (YVZ), has been published on the [PAI-Website](#) recently:  
After the untimely death of our president last year, Zambia held elections in November 2008, which resulted in Rupiah Banda from the [Movement of Multiple Party Democracy \(MMD\)](#) becoming president. (He was the former Vice President.) In terms of sexual and reproductive health, this has resulted in significant upheaval throughout the health sector, from the health minister to directors in the ministry of health. Many of these individuals were proactive around sexual and reproductive health and rights (SRHR) issues. Consequently, we have had to start again to build new relationships to ensure the enactment of pending SRHR legislation. At the moment, compounding these changes is an apparent misunderstanding among donors and the current government around Zambia's policy direction on HIV & SRHR issues. This may impact processes such as [International Health Partnership](#) (which was to be signed on the April 30th, but has been postponed by donors) and general service delivery across the health sector.

Read the full article on the [PAI-Website](#).



### **Joint RFSU/EPF Study Tour brings European Parliamentarians to Zambia**

From May 16th-23rd 2009 the [Swedish Association for Sexuality Education](#) (RFSU) and the [European Parliamentary Forum on Population and Development](#) (EPF) will bring a six-member strong Parliamentary Delegation to Zambia. The study tour will be conducted in the framework of the [Countdown 2015 Europe](#) project and will raise awareness amongst delegation participants about the unmet sexual and reproductive health and rights needs of Zambians. A special focus of the tour will lay on the access and availability of reproductive health (RH) supplies. The study tour is kindly hosted the by the [Planned Parenthood Association of Zambia](#) (PPAZ) and Youth Vision Zambia (YVZ).

Almost fifty percent of Zambia's population is below the age of 15. The HIV rate is among the highest in the world, and sexually transmitted infections are increasing, especially among the young. Even though the vision of the ongoing health care reform in Zambia is to provide equity of access to cost-effective quality health care as close to the family as possible and to significantly increase life expectancy in Zambia (which is currently at 38 years on average), the country is still faced with inequitable access to basic health services between provinces, urban and rural areas. Less than half (47%) of women were assisted by a trained health professional at their last birth, according to the [Zambian Development and Health Survey](#). Low education status, lack of access to contraceptive information amongst young people, especially women of reproductive age, as well as poor involvement and participation of men in family planning services contribute to a low utilisation of family planning services and use of contraception in Zambia.

During their week-long stay, delegation members coming from the Netherlands, Ireland, the UK, Sweden, Azerbaijan and Scotland will have the opportunity to meet with government representatives, the Ministry of Health, Members of the Zambian Parliament, representatives of the EC-Delegation, UNFPA and USAID as well as with members of the Health Sector Donor Group to discuss the above mentioned issues with the relevant stakeholders.

The visits of in-country projects such as the Africa Direction Community based Youth Centre, the Young Men as Equal Partners Programme or the MSI outreach clinic will complement the delegation participant's picture on the sexual and reproductive health situation in Zambia and will help contribute to a better understanding of the necessity to invest in RH supplies as an essential precondition to reach the Millennium Development Goals.

For more information on the study visit to Zambia, please contact [Nadine Krysostan](#), EPF Senior Advocacy Officer or [Saskia Pfeijffer](#), EPF Programme Associate.



### **Maternal Mortality Expert Dr. Grace Kodindo Awarded Prestigious Millennium Development Goal Torch by Danish Government**

Dr. Grace Kodindo, Chadian OBGYN and assistant clinical professor of Population and Family Health at the Columbia University Mailman School of Public Health, was awarded the prestigious Millennium Development Goal (MDG) 3 Champion Torch in recognition of her efforts to secure comprehensive reproductive health care for women worldwide on May 4th. The award was presented to Dr. Kodindo by Danish Minister for Development Cooperation Ulla Tornaes at a ceremony in Copenhagen, Denmark. The ceremony was also attended by H.R.H. The Crown Princess of Denmark.

As part of Denmark's call to action on MDG3, the Government of Denmark has created the MDG3 Champion Torch initiative, that recognizes representatives of governments, the private sector, civil society, the media, individuals from North and South, and international organisations for their commitment to MDG3 and to 'doing something extra' in support of gender equality and women's empowerment. The MDG3 Torch may be passed to others that make additional commitments.

The awardee is currently touring seven European cities, speaking at screenings of the BBC documentary *Dead Mums Don't Cry* (see Agenda below). *Dead Mums Don't Cry* follows Dr. Kodindo's work as the head of the primary maternity hospital in Chad in 2005, where she struggled to preserve women's lives in the face of profound poverty, a dearth of supplies, and minimal government support.

The screening of *Dead Mums Don't Cry* is a joint initiative of the Reproductive Health Access, Information and Services in Emergencies (RAISE) Initiative and Countdown 2015. Countdown 2015 comprises a group of 18 European nongovernmental organisations that collaborate to secure funding for vital reproductive health supplies and equipment. The [RAISE Initiative](#) managed by the Columbia University Mailman School of Public Health and Marie Stopes International, works to ensure reproductive healthcare in situations of conflict and disaster. At present, Dr. Kodindo works as the Medical and Advocacy Advisor for the RAISE Initiative.

For further information please contact [Janet Butler-McPhee](#) at RAISE or [Maaïke van Min](#) at Countdown2015 Europe.

Source: [Global Health Council](#)

### **RHInterchange Session at Global Health Council**

[The RHInterchange \(RHI\)](#) welcomes our new on-line users, who are making use of the information for their research reports and as input to their procurement planning. During the last completed quarter, registrations came from Albania, Benin, Denmark, Haiti, Kenya, Liberia, Nepal, Pakistan, Rwanda, Viet Nam, Tanzania, Uganda, United Kingdom, and the United States.

This month, we welcome the Ministry of Health of Uganda, which is sharing its information regarding contraceptives purchased with Government of Uganda funds from 2006 to present. The [Institute for Reproductive Health \(IRH\)](#) and the Logistics Management Division of the [Ministry of Health and Population of Nepal](#) demonstrated their ongoing commitment to share information with the larger community by providing new updated information to the RHI.

The team is pleased to announce that [UNFPA](#), a significant contributor of information, has enhanced the way in which it provides data. Among other improvements, UNFPA has updated all information from 2004 to present with the actual total landed cost of orders, thus replacing an average landed cost.

To hear more, please be sure to come by our [panel session at the Global Health Council in Wahington D.C. on Friday, 29 May from 2:30 - 4:15 pm. G2: Improved Health through Knowledge Networks](#)

For more information please follow the link or contact [Mimi Whitehouse at RHI](#).



## **Uganda Family Planning - Government Urged to Make Services More Accessible**

During the launch of the Reproductive Health Supplies Advocacy Network in Kampala, executive director of [Reproductive Health Uganda \(RHU\)](#), Elly Mugumya, stated that the accessibility of long-term family planning methods is still a problem. Mugumya stressed the need for everybody to be able to choose, obtain and use quality and affordable RH supplies whenever needed.

The Reproductive Health Supplies Advocacy Network brings together civil society organisations advocating improved reproductive health financing and consists of parliamentarians, health consumer protection activists, officials from the Population

Secretariat [United Nations Population Fund](#) (UNFPA), the [Ministry of Health](#) (MoH) and the media.

Only 10 % of the national budget is allocated to health while the [World Health Organisation](#) (WHO) recommends 15% by 2015. Government funding is declining and donors priorities often do not match the local needs. The decline in funding worsens shortages in procurement and drug stocks, Dr. Moses Muwonge, reproductive health commodity security coordinator of the MoH, said.

Commodities expire and orders and deliveries are delayed because of poor coordination of activities and interventions by stakeholders at all levels of reproductive health services. A well developed reproductive health strategy could cause a shift to more predictable, planned and sustainable country-driven approaches for ensuring access and use of RH supplies.

Source: [AllAfrica, May 10th 2009](#).

### **Countries at Risk Emergency Stock issues**

The [Countries at Risk \(CAR\) Working Group](#) continues to coordinate global donor responses to emergency stock issues and information requests. During this month's teleconference, UNFPA advised CAR members that it had Depo-Provera, female condoms, and Microgynon on hand to avert anticipated stockouts in Kenya. Meanwhile, members also learned of pending stock-outs of Depo and Microval in Tanzania. Although World Bank funds should become available following the completion of an external audit of the country's basket fund, this could take some time, so CAR members are exploring interim responses. Finally, in Uganda, a shortfall of Microgynon should soon be relieved as UNFPA's shipment arrives on May 20. In Asia, Bangladesh remains without implants. UNFPA has, however, allocated US\$500,000 for additional stocks; once it receives the green light from the Directorate General of Family Planning, 26,500 units of Implanon can be in country within two to four weeks. Finally, UNFPA reports that shipments of the emergency contraceptive Postinor should be in Paraguay by mid-June. At the same time, concerns were expressed over possible leaks of this product into the private sector.

For more information please contact [Kevin Pilz](#).

### **MSI reports major expansion of family planning, safe abortion services globally in 2008**

[Marie Stopes International](#) (MSI) programmes served six million clients in 2008, one million more than in 2007. According to an annual management report, MSI averted 1.9 million unsafe abortions during the period January-December 2008. Most of MSI's health impact occurred in rural areas or urban slums in developing countries.

MSI's family planning and safe abortion services saved 1.8 million years of productive life due to premature mortality or disability, and spared individual households and

national budgets nearly GBP 600 million in costs, or GBP 20 for every GBP 1 invested by MSI in the developing world.

'MSI service delivery and other efforts made a large-scale impact on the lives of millions of women, men and children globally in 2008,' wrote MSI chief executive Dana Hovig in his annual letter to the MSI Global Partnership. 'We continue to expand and improve the quality, efficiency and impact of our programmes. We are striving to do more and to be better.'

For example, MSI provided approximately 1.2 million women or men with long-acting and permanent clinical contraception, an increase of 16%.

To read the full article, please visit the [Marie Stopes Website](#).



## Focus on ...

### Global Partners in Action: NGO Forum on Sexual and Reproductive Health and Development

In recognition of the 15 year anniversary of the International Conference on Population and Development (ICPD), Global Partners in Action: NGO Forum for Sexual and Reproductive Health and Development aims to strengthen NGOs working in partnership to advance sexual and reproductive health and rights for sustainable development in an uncertain and interdependent world. The Government of Germany and the United Nations Population Fund (UNFPA) are the co-hosts of this forum that takes place from September 2nd through September 4th in Berlin, Germany.

Global Partners in Action is led by NGOs and is for NGOs, with considerable emphasis placed on ensuring significant participation from the Global South and of young people. Global Partners in Action will be a highly interactive working meeting, where participants will be able to contribute to approximately 30 breakout sessions, as participants, facilitators, resource persons or rapporteurs. In addition, orientation sessions and regional meetings are being planned for the first day. Participants will furthermore have the opportunity to network and share their work and experiences in a marketplace and at a global cafe. Plenaries featuring high level speakers will also inspire Global Partners in Action. Finally, all participants will be welcome to assist in the drafting process for the Call to Action throughout the duration of the Forum and outcomes from discussions in various sessions will feed into the Call to Action and an NGO Action Plan.

There will be 400 participants at Global Partners in Action. Out of these, 225 will come from the Global South and will, as far as possible, be fully funded to attend. There are 100 spots for Northern NGOs; these will not generally be funded to attend. However, there will be no registration fee. The forum steering group aims to ensure diverse

representation from as many countries, regions and NGO's working in different fields of health and development as possible. Youth participation is also a priority and a commitment has been made to have at least 25% of participants under the age of 30. In recognition of the vital role that Regional Networks play in implementing and monitoring the ICPD Programme of Action, a commitment has been made to have at least 30 Regional Networks participate at the Forum.

### **Call for Applications - Deadline May 25th 2009**

Global Partners in Action is inviting applications from individuals representing NGO's around the world that:

Are committed to the principles of the ICPD Programme of Action; Focus on activities that address key aspects of the ICPD Programme of Action (for example: sexual and reproductive health and rights, women's rights, HIV and AIDS, youth participation, gender equity, etc.); Work at either a local, national, regional or international level; Are interested and able to share best practices, lessons learned and areas for capacity building; Can commit to collaborative follow-up to Global Partners in Action, guided by the NGO Action Plan and Call to Action that will be produced during the Forum. Can commit to collaborative follow-up to Global Partners in Action, guided by the NGO Action Plan and Call to Action that will be produced during the Forum.

Eligible candidates are invited to complete the [application form](#). The interest expressed about potential breakout session topics (question 12) will feed into the Forum's programme, so applicants are encouraged to carefully select topics that are most relevant to their NGO's work.

The deadline for applications is Monday May 25th 2009. Applicants are highly recommended to submit their application using the online application form on the [Global Partners in Action website](#) or as a second option, by [email](#). If neither of these is an option, applications can also be received by fax at 1 (212) 297 4906.

Applications will be reviewed by an NGO-led Selection Committee, which has set up several measures to ensure a transparent and objective process. For example, an external consultant will remove all personal and organizational information from initial applications to make them anonymous. They will also be assigned a code that identifies their region, country and age group. The anonymous applications which fill all of the selection criteria will then be analyzed for content and relevance to the ICPD agenda and the objectives of the forum. Full details about the selection process will be available on the [Global Partners in Action website](#).



## Look out for Nominations for International Service's 2009 Human Rights Awards

International Service's Human Rights Awards recognise the achievements of organisations and individuals around the world who work at a grassroots level to promote human rights and change things that cause people to be excluded, impoverished or disempowered. One of the awards allows nominations for sexual and reproductive health and rights (SRHR) champions.

The closing date for nominations is Friday 3rd July 2009.

Four award categories:

Award for the Defence of the Human Rights of Women  
Award for the Defence of the Human Rights of Children  
Award for the Defence of the Human Rights of Disabled People  
Award for the Defence of the Human Right to Sexual and Reproductive Healthcare

The Human Rights Awards celebrate the commitment and tenacity of these often unsung heroes by:

raising the profile of the award-winners' achievements affirming the importance of work that seeks to change the things which cause people to be excluded, impoverished or disempowered promoting the importance of working with fundamental respect for all people, especially those who suffer poverty and injustice

For information about eligibility and how to submit a nomination, please visit the [International Service Website](#)

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Project RMA is a joint effort of Population Action International (PAI), the International Planned Parenthood Federation (IPPF) and the German Foundation for World Population (DSW) to increase political and financial support for reproductive health supplies at the global, regional and national levels. Project RMA works closely with the Reproductive Health Supplies Coalition and its' Resource Mobilization and Awareness Working Group.

# Project

## Resource Mobilisation and Awareness (RMA)



If you have any questions or comments, please contact the editors [Caroline Jane Kent](#) and [Martin Kuehn](#) at DSW.