

**Reproductive Health Commodity Security:
Partnerships for Change**

The UNFPA Strategy

April 2001

FOREWORD

The United Nations Population Fund (UNFPA), which has embarked upon a process that derives from the Programme of Action of the International Conference on Population and Development (ICPD) and the agreed-upon Key Actions for its implementation, has identified Reproductive Health Commodity Security (RHCS) as a priority area of its work at both global and national levels. This is carried out within the overall context of UNFPA support to reproductive health programmes and their major components, including family planning, maternal care, sexually transmitted infection/human immunodeficiency virus (STI/HIV) prevention, and quality of care, with due attention to sociocultural concerns. The work spelled out in this UNFPA strategy document is linked to, and should be read in conjunction with, its companion document, “Reproductive Health Commodity Security: Partnerships for Change. A Global Call to Action.”

Drawing upon its unique database on donor support for contraceptives and logistics, UNFPA, in a meeting recently held at the United Nations, highlighted potential shortfalls in donor support for reproductive health commodities, including the supply of condoms for STI/HIV prevention. At the same time, it developed a strategy for achieving RHCS by means of UNFPA-led and coordinated partnerships at global and national levels. Recognizing that the goals and objectives of ICPD cannot be reached by any one agency alone, UNFPA developed a “call to action” wherein each partner -- Governments, donors, United Nations system partners, non-governmental organizations (NGOs), and the private sector -- would strive, each in accordance with its own comparative advantage, to work cooperatively in fulfilment of RHCS. UNFPA agreed, in response to its ICPD mandate in this area, to lead and coordinate the effort.

To achieve its RHCS strategy, UNFPA has enhanced its capacity at headquarters and in the field. Staff are being added to the Commodity Management Unit to better implement its work plan in fulfilment of the strategy; the Procurement Section is being strengthened; the UNFPA database is being expanded; UNFPA’s field offices and Country Technical Support Teams will be strengthened through training activities; and technical and operational guidelines will be developed, all to ensure that RHCS is integrated into UNFPA support to national reproductive health programmes.

The UNFPA strategy focuses, at global and national levels, on improved partnerships, coordination, advocacy, national capacity building, resource mobilization, sustainability and technical backstopping. Although ambitious, the global effort to achieve RHCS is feasible if all partners work together cooperatively. UNFPA will use its human and financial resources to ensure that the efforts of all partners are monitored at global and national levels for maximum effectiveness.

We would like to express special appreciation to the Governments of the United Kingdom, the Netherlands and Canada for recent grants to respond to urgent shortfalls in reproductive health commodities. These generous donations will help advance our collective efforts to achieve one of our priority institutional aims: a secure supply and choice of high-quality reproductive health commodities in developing countries.

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LIST OF ABBREVIATIONS

| | |
|--------|--|
| AIDS | Acquired immunodeficiency syndrome |
| CBD | Community-based distribution |
| CCA | Common Country Assessment |
| CPA | Country Population Assessment |
| CSM | Condom social marketing |
| CST | Country Technical Services Team |
| HIV | Human immunodeficiency virus |
| ICPD | International Conference on Population and Development |
| IUD | Intra-uterine device |
| LMIS | Logistics management information system |
| NGO | Non-governmental organization |
| RBM | Results-based management |
| RHCS | Reproductive health commodity security |
| RTI | Reproductive tract infection |
| STI | Sexually transmitted infection |
| SWAp | Sector-wide approach |
| UNAIDS | Joint United Nations Programme on HIV/AIDS |
| UNDAF | United Nations Development Assistance Framework |
| UNDP | United Nations Development Programme |
| UNFPA | United Nations Population Fund |
| WHO | World Health Organization |

I. INTRODUCTION

1. As demand for reproductive health services and commodities is increasing, there is a need for the international community to respond in effective ways. Most developing countries, particularly the poorest, and especially those in Africa, while developing national capacity in this area, will still continue to rely on reproductive health commodities supplied by donors for the foreseeable future. To succeed, the overall global strategy for reproductive health commodity security (RHCS) will depend upon the contributions of many partners, each according to its own comparative advantage. The partners would include programme countries; bilateral donors; the World Bank and the regional development banks; United Nations partners, such as UNFPA, the World Health Organization (WHO) and the Joint United Nations Programme on HIV/AIDS (UNAIDS); foundations; non-governmental organizations (NGOs); and the private sector. This paper outlines the strategy that UNFPA has developed for its contribution to RHCS, based on the approach outlined in a companion paper, "Reproductive Health Commodity Security: Partnerships for Change. A Global Call to Action."

2. The need for improved RHCS is well documented. A recent analysis by UNFPA of trends in donor support for contraceptives against estimates of future needs suggests that while demand has been increasing, donor support, at least between 1996 and 1999 and the first part of 2000, has actually been declining. Donor support for contraceptives in 1999 reached its lowest level in five years.

3. The UNFPA strategy responds to the objective outlined in *Key Actions for the Further Implementation of the ICPD Programme of Action* to help Governments strengthen their capacity to

"ensure that by 2015 all primary health-care and family planning facilities are able to provide, directly or through referral, the widest achievable range of safe and effective family planning and contraceptive methods; essential obstetric care; prevention and management of reproductive tract infections, including sexually transmitted diseases; and barrier methods, such as male and female condoms and microbicides if available, to prevent infection" (paragraph 53).

UNFPA is also responding to the specific mandate of the International Conference on Population and Development (ICPD) and the ICPD+5 process, in which UNFPA was urged to strengthen its leadership role in assisting countries in taking "the strategic action necessary to ensure the availability of reproductive health services and choice of reproductive health products, including contraceptives" (*Key Actions*, paragraph 61).

4. Each country situation is unique, resulting from the interplay of different political, social, cultural and economic variables. It is necessary, therefore, to develop approaches that are specific to the situation prevailing at a given time in each country. UNFPA, because it has an effective presence in most countries and solid credibility with Governments, has a strong comparative advantage in this regard. All partners will need

to identify their priorities, mobilize resources and develop complementary activities, as appropriate, in these areas.

5. To facilitate this coordinated effort, UNFPA has developed and begun to share a strategy, work plan and budget on how to strengthen the UNFPA contribution to achieving RHCS. A series of technical and regional meetings has been scheduled with Governments, key donors and other partners to discuss in detail the issues related to demand and their plans for procurement and programme implementation. The adoption by all partners of the global RHCS strategy would provide the basis for the development of complementary strategies that would improve RHCS implementation. Coherent collaborative approaches would strengthen subsequent proposals for funding to support its implementation and, ultimately, promote increased funding for the supply of reproductive health commodities and services.
6. The next section of this document describes the UNFPA response, what it plans to do and how these outputs can be achieved by UNFPA in partnership with other agencies.

II. THE UNFPA RESPONSE

7. As one of the RHCS partners, UNFPA is fully committed to managing at global and country levels the necessary support, coordination and monitoring mechanisms that are required for the success of the RHCS strategy. For the past 10 years, the direct predecessor of the group responsible for guiding and managing the Fund's core RHCS activities, the Commodity Management Unit, has moved the issue of reproductive health commodities and logistics management to the forefront of the reproductive health agenda.¹ Its collaborative studies on contraceptive requirements and logistics management needs have taken a holistic view of the commodity supply problem in some 20 developing countries, examining reproductive health policy issues; long- and short-term needs; public, private and NGO service-delivery roles; logistics and quality issues; condoms for sexually transmitted infection/human immunodeficiency virus (STI/HIV) prevention; strategies for implementation; and financing. The recommendations of these studies have been used in many countries to develop improved national programme responses in procurement, logistics support and finance. Other activities have included estimates of global contraceptive requirements; the issuance of technical guidance documents on, for example, procurement and logistics management; the conduct of logistics management training workshops; and the implementation of the UNFPA Private Sector Initiative, which promotes an expanded role for the commercial private sector in improving access to affordable high-quality products.
8. Since 1990, UNFPA has maintained a database on the contraceptive commodities provided by donors. The information in the database is analysed in an annual Web-based report entitled "Donor Support for Contraceptives and Logistics" and provides the basis

¹ The Commodity Management Unit's predecessor, the Global Initiative on Reproductive Health Commodity Management, was for 10 years under the direction of the Fund's Technical Support Division and under the overall guidance of its Global Initiative Working Group.

for observing trends in donor contraceptive support and for planning appropriate responses. The UNFPA commodities database will be expanded in the year 2000 to address demand-side issues and include other reproductive health commodities at both global and country levels. This expansion will strengthen the value of the database as a tool for planning, monitoring and evaluation.

9. The UNFPA Commodity Management Unit works closely with the UNFPA Procurement Section in the identification of logistical problems in the supply programmes of developing countries. In close collaboration with the Procurement Section, the Unit manages the UNFPA Global Contraceptive Commodity Programme, a mechanism that facilitates speedy responses to urgent or emergency requests from UNFPA country offices on behalf of national programmes. The Programme is a revolving fund that maintains buffer stocks of essential commodities to expedite delivery and to reduce the need to rely on costly air freight.

10. In line with the goals established as part of the ICPD+5 process, it is critical to support the building of sufficient national capacity to address the full range of RHCS issues. To do this, UNFPA recognizes that a strong understanding of and commitment to the goals of RHCS are needed at all levels of the organization, both at headquarters and in the field offices. The Fund is committed to integrating the work of the Commodity Management Unit fully into ongoing country programmes supported by UNFPA. This would include, for example, strengthening internal coordination mechanisms among, at headquarters, the Commodity Management Unit, the Procurement Section, the Global Contraceptive Commodity Programme and the geographic divisions and, in the field, the CSTs and the Fund's country offices in more than 60 countries. See Annex 1, UNFPA Work Plan for Reproductive Health Commodity Security (2001-2002), for details.

11. As the main goal of RHCS is to contribute to improved reproductive health, the main purpose of the UNFPA strategy is, separately and in collaboration with others, to improve the capacity of national programmes in developing countries to manage key areas of reproductive health commodity supply and, increasingly, to provide those commodities to all who need them. Building national capacity to manage the entire supply chain is essential to ensuring that individuals have access to high-quality and affordable reproductive health commodities when and where they want them. This is key to sustainability over the long term. This goal would be addressed by activities at both global and national levels.

A. Actions at the global level

12. UNFPA will more fully develop and refine its long-term strategy through consultations with all interested parties. The existing coordination mechanism called the Global Initiative Working Group will be expanded to embrace a broadened mandate and a more proactive agenda. The UNFPA strategy is the basis for the development of the UNFPA work plan that will be used to implement the strategy and reach defined goals and outputs. UNFPA will provide regular updates to the UNDP/UNFPA Executive

Board on the challenges faced and achievements made in fully developing and implementing the RHCS strategy. The specific outputs to be achieved by UNFPA, together with indicators for each output, will conform to the logical framework matrix that UNFPA has adopted as a management tool to permit reliable assessments of achievement.

13. The UNFPA Commodity Management Unit has thus far focused on contraceptive commodities: combined oral contraceptive pills, progesterone-only pills (mini-pills), intra-uterine devices (IUDs), Norplant®, injectables, male and female condoms, diaphragms, sterilization supplies, spermicidal products, emergency contraception and condoms for STI/HIV prevention. The UNFPA strategy would expand the work of the Commodity Management Unit into other reproductive health commodities for maternal care, the prevention and management of reproductive tract infections (RTIs) and STIs, and the prevention of HIV. Similarly, the Fund's procurement capability would expand from contraceptive commodities into a wide range of reproductive health commodities. These measures are consonant with the Fund's emphasis on the prevention of unwanted pregnancies and of the risks from pregnancy, childbirth and post-abortion sequelae as well as the prevention of STI/HIV infections.

14. In full support of national capacity-building efforts, UNFPA would expand its work with other partners in areas of the proposed strategy including information sharing and advocacy, with emphasis on in-country and global resource mobilization efforts; technical resources development; technical backstopping; orientation and training of UNFPA country offices and CST specialists; coordination and collaboration among all partners, including the development of early-warning mechanisms for shortfalls and mechanisms for follow-up; and the development of standards, protocols, training materials and guidelines.

B. Actions at the country level

15. To assist countries in the implementation of RHCS, UNFPA would concentrate its work in those areas in which it has a comparative advantage. These include the knowledge and expertise that UNFPA has accumulated in the last 30 years; its support for comprehensive reproductive health programmes that address both demand and supply issues; its field offices in developing countries; its experience in procurement (including the Global Contraceptive Commodity Programme), which serves the needs of its own programmes and those of many other donors; the Commodity Management Unit and its RHCS Working Group; its nine CSTs, which provide technical assistance on logistics and supply issues; and the Fund's already close working relations with programme countries and other partners, such as WHO, UNAIDS, bilateral donors, the World Bank and regional development banks, NGOs, foundations and the private sector.

16. In countries where UNFPA has programmes, its Representatives would consult with national counterparts and other partners in establishing RHCS coordination mechanisms or theme groups made up of interested parties to assist Governments in planning, identifying gaps and coordinating donor, NGO and private-sector support to national

RHCS programme efforts. These working groups would also provide an interface with the Commodity Management Unit at UNFPA headquarters and, through it, with its RHCS Working Group, for exchanging information and addressing broad issues that cannot be readily resolved at the local level.

17. Advocacy. Advocacy is important for raising awareness of the RHCS issue and the necessity for a concerted and consistent response. It is also important for generating support to UNFPA-led coordination mechanisms at global and national levels. Advocacy interventions based on the UNFPA global database can take many forms, including formal consultations, informal meetings, training, public relations, study tours, publications, newsletters and Web sites for diverse purposes, including information-sharing and networking among partners in various countries. An annual UNFPA advocacy publication would address the issue of RHCS, focusing particularly on resource shortfalls and ways of meeting needs. Cost-effective advocacy efforts would ensure that all partners give RHCS a high priority, bring additional partners to the table and facilitate the work of fund-raising.

18. Resource mobilization. UNFPA is already the largest international supplier of contraceptives and other reproductive health commodities. As a result of an analysis of the Fund's donor support database, it was possible to identify major commodity shortfalls, and thereby prompt the Governments of the United Kingdom, the Netherlands and Canada to provide additional funding for reproductive health commodities in 2001, in the amount of approximately \$US 80 million. As UNFPA helps to strengthen national capacity in commodity management, it would also help to develop better systems to monitor and evaluate the collective efforts to achieve RHCS. The resulting information would be valuable in strengthening programme design and attracting additional resources to improve the depth and reach of the global and national effort.

19. Technical resources development. To strengthen technical resources at the global level, UNFPA would separately and in collaboration with others develop a technical resources database on all aspects of RHCS and any related policy, operational and technical guidelines, publications and tools that may be needed by Governments, other national counterparts, UNFPA country offices, CSTs and other partners. UNFPA is developing with partner agencies a commodity assessment framework to improve consensus and joint efforts. UNFPA will also need to focus on how to ensure RHCS in the context of health-sector reform and SWaps.

20. Working closely with developing-country Governments, UNFPA already employs a number of global and national coordination mechanisms that address RHCS. As a priority, it will be necessary to incorporate RHCS more fully into reproductive health programming exercises. UNFPA will issue guidance notes and checklists to integrate RHCS into the Fund's Country Population Assessment (CPA), programme reviews and the programme development process. Activities associated with the implementation of this strategy would increasingly be incorporated into broader mechanisms such as the Common Country Assessment (CCA) and the United Nations Development Assistance Framework (UNDAF). The required standards, norms and protocols – the basic tools for

providing policy and technical guidance – would continue to be developed in collaboration with other partners, especially WHO and UNAIDS.

21. Technical backstopping. Work in technical backstopping involves expanding the UNFPA database to address the element of demand for contraceptives and other reproductive health commodities. The Commodity Management Unit would continue to provide technical support for assessment missions to identify national needs and for regional workshops on how to develop and strengthen country-specific logistics strategies and more sustainable programmes. The UNFPA Private Sector Initiative will be evaluated in 2001 to define and possibly re-focus its work to support RHCS and, particularly, its sustainability component. It would continue, in collaboration with UNFPA Representatives and CST specialists, to develop and share lessons learned and best practices in this area. The Commodity Management Unit would continue to act as a channel for guidance on the introduction of new and less well-known reproductive health commodities such as the female condom, emergency contraception and microbicides, as these become available.

22. Knowledge development. Good practices and lessons learned concerning RHCS would be collected and shared widely with all interested parties as well as integrated into other information-sharing initiatives such as the UNFPA “Progress” database, now being developed. “Progress” is a searchable interactive learning system on programme experiences, lessons learned and best practices. Drawing upon available funds and working with partners, UNFPA would develop intensified RHCS programming exercises in selected countries. These activities would aim specifically at gaining and sharing further knowledge on model approaches to operationalizing RHCS at the country level.

C. Reproductive Health Commodity Security and STI/HIV prevention

23. Within the context of reproductive health programmes and RHCS, STI/HIV prevention is a major issue. One fundamental aspect of STI/HIV prevention is condom programming. Condom shortfalls in developing countries are threatening the viability of national interests in many areas. Condom programming, which is a sub-component of the UNFPA Reproductive Health Commodity Security strategy, is a strategic approach for STI/HIV prevention that focuses on condom protection while combining elements of communication for behaviour change, supply and support into a coherent framework. It can draw upon and incorporate many possible approaches depending upon local conditions, such as condom social marketing (CSM), community-based distribution (CBD), and promotion of the concept of dual protection. The important issue is that the various elements of the strategy and the implementation partners are joined together in a well-coordinated demand-driven strategic framework.

24. Broadly speaking, the *demand* element includes market research, market segmentation, communication for behaviour change, and targeted distribution to the most appropriate access points; the *supply* element addresses the logistics management

function, including estimating commodity and resource requirements, securing finances, procurement, sales and distribution systems, quality assurance and logistics management information systems (LMIS) as well as issues related to quality of care and a well-functioning health delivery system; the *support* element includes, on global and national levels, links with RHCS advocacy for strong political leadership, commitment and positive policy statements and coordination, management strengthening and staff training. Support also includes programmatic links to UNFPA Country Programmes, CCA and UNDAF.

25. Resource mobilization for condom programming will be evidence based and demand driven and support the necessary human, financial and technical resources for programme implementation. Guidelines and checklists on RHCS will include portions on condom programming. A Rapid Assessment Protocol for Planning Condom Programming will be developed and tested. The implementation of the programme will be tracked and fine-tuned by means of regular monitoring and evaluation for continual improvement and accountability.

26. The primary beneficiaries of UNFPA's collective work with its partners in condom programming will be the national programme planners and managers in the public, private and NGO sectors who will, with the assistance of UNFPA and other partners, be enabled to develop well-designed needs-based condom programming strategies and work plans. The ultimate beneficiaries of this project will be at-risk women, men and young people who will thus be enabled to better protect their sexual and reproductive health.

III. CONCLUSIONS

27. Within a results-based management system (RBM), the Fund's strategic aim at headquarters and in its country offices would be to achieve the following outputs or results at global and national levels:

- Obtain the commitment of partners to the global strategy for RHCS and the outputs and mechanisms required for its achievement;
- Promote understanding about the necessity to mobilize support for commodities but always as an integral part of comprehensive high-quality reproductive health services that include attention to sociocultural factors;
- Develop a technical resources database;
- Develop additional technical, programme and policy guidance;
- Help identify national capacity-strengthening needs and provide and coordinate technical support to national programmes;

- Identify gaps in key areas of commodity supply and demand and ensure coordination of appropriate responses;
- Collect, disseminate and foster an exchange of lessons learned at global and country levels by various means, including the UNFPA Web site;
- Advocate for reproductive health commodity sustainability, including innovative approaches as appropriate;
- Facilitate coordination among all partners, including at the country level under the leadership of national authorities;
- Advocate for the necessary financial support for reproductive health commodities from both national and international sources; and
- Advocate that high-quality, affordable reproductive health products, including condoms for STI/HIV prevention, become universally accessible to all by the year 2015.

28. To accomplish these ends, UNFPA would engage in activities that:

- Ensure that commodity security is an integral component of national reproductive health programmes supported by the Fund, using all appropriate opportunities, including CPAs, programme reviews and programme development exercises;
- Ensure that reproductive health programmes develop and implement country-level strategic plans to ensure the continued availability and accessibility of reproductive health commodities to individuals. When requested, UNFPA would assist national programmes in designing, implementing and evaluating such reproductive health commodity strategies and action plans;
- Ensure that UNFPA Representatives assist Governments in developing an RHCS coordination mechanism at the country level that includes all appropriate partners. Such mechanisms would also provide an interface with UNFPA headquarters and its RHCS Working Group for exchanging information and addressing issues that cannot be resolved at the local level;
- Ensure that each CST has an adviser or focal point on condom programming and logistics management;
- Continue its role as the largest public-sector procurement agency for contraceptives and other reproductive health commodities, making such services available to, for example, Governments, United Nations organizations and agencies, the World Bank and regional development banks, and NGOs;

- Expand its existing reproductive health commodity database and use it to track donor, government and private-sector support for reproductive health commodity supply and to identify gaps;
- Establish and make available on the Internet systems that collect and share success stories, lessons learned and information on the partners' activities, that would strengthen the partners' ability to provide support according to their comparative advantages; and
- Organize meetings of working groups and partners to review progress and to identify and solve problems, including for example, supply management as an agenda item in the context of the annual consultation with donors.

IV. NEXT STEPS

29. The next steps are as follows:

- UNFPA will disseminate widely its RHCS Strategy and its companion document, "Reproductive Health Commodity Security, Partnerships for Change: A Global Call to Action" to all interested parties both in hard copy and on the UNFPA Web site;
- As a key action for the further implementation of the ICPD Programme of Action, UNFPA will fully integrate the RHCS strategy into the policies and practices of ongoing country programmes supported by UNFPA;
- UNFPA will share a work plan and budget to expand the role of the Commodity Management Unit to strengthen the Fund's contribution to achieving RHCS. It will develop and disseminate a list of essential reproductive health commodities;
- UNFPA and its partners will strengthen national capacity to develop and put in place commodity management information systems and, where needed, procurement systems, at the country level, starting with the minimum information required for monitoring and planning; develop an inventory of existing tools or guidance documents to help countries address reproductive health commodity issues; develop a resource guide for technical assistance for reproductive health commodity needs; develop models for forecasting and estimating commodity needs; develop a system to qualify and monitor manufacturers of reproductive health supplies; identify countries where there is potential for early successes in improving commodity sustainability; and finally, undertake country assessments and develop country-level RHCS coordinating mechanisms;
- Other partners are encouraged to develop their own RHCS strategies, work plans and budgets for their specific contributions to the global effort;

- To facilitate this coordinated effort, a series of further technical and regional meetings will be scheduled with national programme representatives, donors and other partners to discuss in detail their procurement and programme implementation plans; and
- Finally, the UNFPA strategy provides an overall framework for attracting additional funding to support its implementation and to increase funding for the supply of reproductive health commodities, including condoms for STI/HIV prevention.

**UNFPA Work Plan for Reproductive Health Commodity Security
(2001-2002)**

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| <i>Output 1: Management capacity, at country level, in terms of forecasting, securing finances, procurement, and delivery management strengthened to achieve Reproductive Health Commodity Security (RHCS)</i> | |
| Activities | Means of Verification |
| Institutionalization and dissemination of RHCS Strategy in UNFPA | Circular from Executive Director on the outcome of the 22 September Consultative Meeting (action completed) |
| Guidance on the role of UNFPA Representatives in RHCS and condom programming. | UNFPA will prepare brief technical guidance notes for field offices on how to assess reproductive health commodity needs; mobilize the resources to meet those needs; introduce condom programming; and address sustainability issues (to be completed by 05/01). |
| Regional RHCS meetings | RHCS strategy development regional workshops and briefings will be organized for UNFPA field offices and concerned government officials to identify regional issues; promote development of country-specific strategies on RHCS and condom programming; and share best practices and lessons learned in this area (to be completed by 10/01). |
| Contribution to strengthening national capacity building in RHCS and condom programming | UNFPA HQ and CSTs and other technical agencies will work together to provide technical assistance on RHCS and condom programming in the context of strengthened national essential drug policies and systems (ongoing activity). |
| Training/orientation of UNFPA Representatives and CST Advisers on RHCS and condom programming | Separate workshops will be organized to provide technical orientation to UNFPA Reps and CST advisers on how to estimate unmet needs; understand demand, supply and support conditions in their respective countries/regions; facilitate Governments' capacity-building |

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| | efforts; introduce the female condom (to be completed by 07/01). |
| Focused support to selected countries to pilot test strategies to implement RHCS and condom programming | In parallel to above efforts to strengthen programme development in all countries, UNFPA will send missions to target selected countries to develop best practices and model approaches (ongoing activity). |
| Develop database on RHCS and condom programming technical resources: institutions; training materials; tools; publications; individuals; etc. | Consultant will be employed to establish this Internet-based resource database that can be accessed and used by countries, donors and other agencies (ongoing activity). |
| Expand and improve present contraceptive database to include country-specific information on reproductive health commodities, including male and female condoms for STI/HIV prevention. | A computer programmer will assist the process. A country-reporting format will be designed and initiated. Meetings will be organized with donors to coordinate plans and activities. Annual report published (ongoing activity). |
| Guidance on introduction of reproductive health technologies, new contraceptive methods, including microbicides when available. | UNFPA staff will collect and disseminate information regarding new methods and programming guidelines for their introduction etc. (ongoing activity). |
| Report and research papers and participation in the external meetings. | Reports on System Loss, Impact on Health Sector Reform on commodity supply systems, “dual protection”, and similar topics will be prepared and disseminated. Similarly, UNFPA will participate in external meetings on RHCS, condom programming, social marketing and other relevant subjects and issues (periodically). |
| <i>Output 2: Partner coordination in terms of increasing the flow of resources and improving coordination at global as well as country levels achieved through the RHCS Working Group meetings and by forming national Working Groups</i> | |
| Consultative meetings | RHCS Working Group will be made more proactive, and a monitoring mechanism will be put in place to address issues related to donor coordination at global and national levels. Resource mobilization will be continued at national and global levels to meet unmet needs for reproductive health commodities as |

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| | identified by the database (to be completed by 10/01). |
| Technical meetings | A series of technical meetings with partners such as donors, technical agencies, United Nations agencies, the World Bank and NGOs, and the private sector etc. will be organized annually to refine strategies and review the progress achieved (to be completed by 10/01). |
| Advocacy publication on RHCS to help fund-raising and donor coordination | One publication each year will address the issue of RHCS, particularly unmet needs and resource shortfalls (to be completed by 11/01). |
| Monthly e-News letter update | Every month an electronic newsletter will be circulated to update all partners on RHCS work in progress (monthly). |
| <i>Output 3: RHCS planned to be more sustainable through cost-recovery mechanisms, social marketing efforts, and the ongoing UNFPA Private Sector Initiative</i> | |
| Technical support for sustainability and cost-recovery activities | The UNFPA Private Sector Initiative, advocacy and support for greater sustainability through demand creation, cost-recovery and/or social marketing and other such mechanisms will be continued and strengthened (ongoing activity). |