



## WEBINAR REPORT

### **Theme:**

# **The Role of Partnerships in Driving Access to Women's Reproductive Health Solutions in Africa**

Date: July 3<sup>rd</sup> 2024

Time: 12:00 - 2:00pm (EAT)

## PANELISTS

### Moderator



**Dr. Gathari Ndirangu**  
Director, Family Planning  
and Reproductive Health  
Jhpiego

### Keynote Speaker



**Prof. Julio Rakotonirina**  
Director of Health & Humanitarian  
Affairs,  
African Union Commission



**Mrs. Mokgadi Mashishi**  
Africa Access Markets Director,  
Organon & Chairperson COWHA



**Ms. Angela Nguku**  
Founder and Executive Director,  
White Ribbon Alliance Kenya



**Mr. Kigen Korir**  
SRHR and Youth Advisor,  
UNFPA Kenya



**Ms. Gladys Mugambi**  
Head of Health Promotion & Education,  
Ministry of Health, Kenya



**Mrs. Caroline Wangamati**  
Strategic Advisor, COWHA

## BACKGROUND

Partnerships between diverse stakeholders are essential in addressing women's reproductive health challenges in Africa. Governments, private sector organizations, NGOs, healthcare providers, and community leaders bring unique resources, expertise, and perspectives. By pooling these assets, partnerships can innovate and implement effective solutions that reach underserved and marginalized populations. Collaborative efforts ensure that interventions are comprehensive and sustainable, addressing the multifaceted nature of reproductive health issues. In Africa, access to comprehensive reproductive health services remains a significant challenge for millions of women. Limited access to contraceptives, maternal care, safe abortion, and family planning services persists across the region, posing significant barriers not only to women's health but also impeding their social-economic empowerment. In response to the pressing need for action, the Coalition for Women's Health in Africa (COWHA) through its Sexual and Reproductive Health (SRH) Technical Working Group decided to explore the untapped potential of partnerships in driving access to reproductive health solutions for women across Africa through an in-depth

webinar discussion that was held on the 3rd of July 2024. The significance of this discussion was driven by current statistics which paint a troubling picture for Africa with regards to women's health; Africa accounts for approximately 66% of global maternal deaths, with an estimated 542 maternal deaths per 100,000 live births<sup>1</sup>. In Africa, around 24% of married or in-union women aged 15 to 49 years have an unmet need for modern contraception, indicating limited access to family planning services<sup>2</sup>. In Sub-Saharan Africa, approximately 36% of girls aged 15 to 19 years have already given birth or are pregnant with their first child, highlighting the high prevalence of teenage pregnancy<sup>3</sup>. Unsafe abortions contribute significantly to maternal morbidity and mortality in Africa, with an estimated 14% of all maternal deaths resulting from complications of unsafe abortion<sup>4</sup>. Many girls face challenges in managing their menstrual hygiene, with approximately 1 in 10 girls missing school during their menstrual periods due to lack of access to menstrual hygiene products and adequate sanitation facilities<sup>5</sup>. In Sub-Saharan Africa, women and girls account for approximately 59% of all adults living with HIV, highlighting the disproportionate impact of the epidemic on women's sexual and reproductive health.<sup>6</sup>

1. [iAHO\\_Maternal\\_Mortality\\_Regional\\_Factsheet.pdf](#).

2. [Costing\\_of\\_Transformative\\_Results\\_Chapter\\_2\\_-\\_Cost\\_of\\_Ending\\_Unmet\\_Need\\_for\\_Family\\_Planning.pdf](#).

3. Niren Ray Maharaj, "Adolescent pregnancy in sub-Saharan Africa – a cause for concern" (2022) 4 Front Reprod Health 984303.

4. Akinrinola Bankole et al, "From Unsafe to Safe Abortion in Sub-Saharan Africa: Slow but Steady Progress" (2020), online: <<https://www.guttmacher.org/report/from-unsafe-to-safe-abortion-in-subsaharan-africa>>.

5. Etsay Woldu Anbesu & Dejen Kahsay Asgedom, "Menstrual hygiene practice and associated factors among adolescent girls in sub-Saharan Africa: a systematic review and meta-analysis" (2023) 23 BMC Public Health 33.

6. Grant Murewanhema et al, "HIV and adolescent girls and young women in Sub-Saharan Africa: A call for expedited action to reduce new infections" (2022) 5 IJID Reg 30–32.

## EXECUTIVE SUMMARY

This webinar brought together key stakeholders to address critical challenges and opportunities. Discussions centered around the current state of women's health, the need for integrated solutions, and the pivotal role of partnerships in policy change and healthcare delivery. Key insights by Prof. Julio Rakotonirina included the African Union's commitment through the Campaign on Accelerated Reduction of Maternal Mortality in Africa (CARMMA) and CARMMA Plus, emphasizing multi-stakeholder collaboration. Mrs. Mokgadi Mashishi highlighted the importance of women's leadership and inclusive solutions, while Ms. Angela Nguku stressed the need to involve women in designing their healthcare pathways. Mrs. Gladys Mugambi and Mr. Kigen Kipkorir addressed gaps in resources, information, and youth-specific SRH services. The dialogue underscored the necessity for holistic approaches, addressing socio-economic barriers, and fostering partnerships to enhance healthcare access, particularly for marginalized groups. This session emphasized collective efforts to align with AU Agenda 2063 and Sustainable Development Goals (SDGs) ensuring no woman or girl is left behind in achieving universal health coverage.

## KEY DISCUSSIONS

**Five key themes were discussed during this roundtable session:**

1. The current state of women's reproductive health in Africa
2. Challenges, gaps and opportunities in access to women's reproductive health solutions
3. The role of partnerships in driving policy change
4. The government's approach to partnerships and existing challenges
5. Driving reproductive health advocacy through partnerships

## OBJECTIVES

This webinar sought to explore the impact of limited access to reproductive health solutions on women in Africa, focusing on social, economic, and health consequences. The webinar intended to help the attendees learn about diverse partnership models and approaches that enhance access to reproductive health services. The event also aimed to foster impactful dialogue and networking among stakeholders, including private sector organizations, government agencies, NGOs, implementing partners, healthcare providers, and community leaders, fostering a dialogue that promotes sustainable access to reproductive health solutions for women across Africa. This webinar garnered widespread attention across the African continent, attracting participants from Kenya, Ethiopia, South Africa, Malawi, Ghana, and Madagascar. Additionally, there were numerous attendees from around the globe.

## KEYNOTE ADDRESS



**Prof. Julio Rakotonirina**  
Director of Health &  
Humanitarian Affairs,  
African Union Commission

In his keynote address, Prof. Julio Rakotonirina began by expressing gratitude to COWHA for organizing the webinar and emphasized the importance of ensuring that no one is left behind in healthcare, particularly women, mothers, and children, as outlined in the AU Agenda 2063 and the SDGs. He also acknowledged the crucial role of collaboration in achieving quality, affordable, and accessible healthcare services for women.

### **African Union Commission's Commitment to Women's Health**

Prof. Julio Rakotonirina highlighted CARMMA, a pivotal component of the African Union's (AU) high-level advocacy efforts on women's health. This campaign focuses on identifying and addressing the underlying issues that limit access to reproductive health and intensifying actions to reduce maternal and infant mortality. Launched in 2009, CARMMA was set to provide a new roadmap for accelerated action in reducing maternal mortality across Africa. Recognizing its significant potential to tackle maternal health issues, the AU introduced a new phase of the campaign, CARMMA Plus, 2021-2030. CARMMA Plus fosters collaboration among various stakeholders, including AU regional economic communities, technical experts, financial institutions, government agencies, non-governmental organizations, civil society organizations, and the private sector, to share experiences and make informed decisions on maternal mortality in Africa.

### **African Union Commission's Approach to Partnerships**

The AU framework for partnerships, particularly with the private sector, applies to all member states and focuses on mobilizing financial resources to achieve tangible improvements in healthcare delivery and reproductive health outcomes. The AU encourages the private sector at all levels to invest in innovative services that advance women's health and has for this reason put in place a regional award named "Mama Africa Award" to recognize the good work of development actors in driving reproductive health solutions across Africa as stipulated in the CARMMA plus interventions. In implementing CARMMA plus initiatives, funding constraints, logistical challenges, and cultural barriers to healthcare access are addressed by private sector investments. The AU emphasizes on the potential opportunities for getting innovative technologies and digital solutions to enhance collaboration and improve healthcare delivery outcomes for mothers, newborns, children and adolescents. In conclusion, Prof. Julio called for continued



collaboration and partnership between different actors in reproductive health and mainly the private sector in spotlighting the existing problems and providing contextualized solutions to women's reproductive health issues. He urged all stakeholders to unite in advancing the AU Agenda 2063 and (SDGs) relating to maternal and child health, emphasizing that no one should be left behind in the pursuit of universal health coverage.

*"Let us remind ourselves that without each of our collective efforts, we cannot achieve our reproductive health goals. Therefore, we must all be involved and accountable."* ~ Prof. Julio Rakotonirina

## KEY DISCUSSIONS AND TAKEAWAYS



**Mrs. Mokgadi Mashishi**  
Africa Access Markets  
Director, Organon &  
Chairperson COWHA

### Organon's Push in the Making of COWHA – A Unified Platform for Advancing Women's Health in Africa

Mrs. Mokgadi Mashishi highlighted how push to establish COWHA was fueled by a collective vision to address the distinct health challenges faced by women and girls across Africa. This dates to 2021, when Organon, the primary principal founding member of the Coalition was launched, not just as a company but 'a commitment to women' with the vision of "a better and healthier every day for every woman". The idea of COWHA was actualized through the firm belief that when women are healthier and empowered, so are their families and communities. Owing to the shocking and disproportionate indicators on women's health across Africa, Organon joined forces with like-minded private sector organizations to establish a dynamic Coalition which would endeavor to create an enabling environment for women's health across the continent.

### Africa still lags in many aspects related to women's health:

- Over 70% of global maternal deaths occur in Africa
- Over 54 million women and girls in Africa have an unmet need for modern contraception
- Unintended pregnancies are as high as 65% in some African countries
- African women bear the highest burden of disease and mortality from cancers owing to issues of late diagnosis
- The representation of women in leadership roles in healthcare across Africa is extremely low.

### Organon leading the way in women representation in leadership

To achieve a healthier every day for every woman, it is essential to ensure women are represented in leadership roles. Organon, being a strong advocate for this principle, was launched with a 70% women representation in their senior leadership team. Additionally, Organon recently launched a new cluster that will be servicing the Middle East, Turkey and Africa, with a 50-50 gender representation across the workforce. This trend should be embraced by all organizations to optimize women's representation in the right spaces. We should endeavor to empower more women to take up leadership roles as currently many women are leading, but from behind. We should acknowledge these women and provide platforms for them to actively and visibly participate in changing the healthcare narrative for women's health in Africa. We can only achieve this by working together. We need to be inclusive in our solutions by amplifying the voices of all women to drive the ownership that is required at community level along with the political will and willingness of the private sector to drive positive change in women's health.

*"Women need to be in spaces where they feel safe, seen, heard, understood, and respected, as there is immense power in that."* ~ Mrs. Mokgadi Mashishi



**Ms. Angela Nguku**  
Founder and Executive  
Director, White Ribbon  
Alliance Kenya

### Challenges, gaps and opportunities in access to women's reproductive health solutions in Africa

#### i. Women's health solutions design gaps – sidelining recipients of care

Ms. Angela Nguku spotlighted how women's reproductive health solutions are designed blindly. Women are treated as passive recipients of care rather than active architects of the care they should receive. Ignorance remains to the fact that women are heterogeneous; some living in rural areas, some in informal settlements, some living with disability, some as nomads etc. Instead of investing in all women, the focus is on the easy-to-reach, and by assuming that one knows all the health needs for women, decisionmakers sit in offices and boardrooms to craft academically driven solutions which do not address the actual needs and reality of the grassroots women. This is why many of the programs lack sustainability, products have limited reach, and interventions are short-lived. To address this gap, we must first realize that the users of care, women in this case, are the real experts and their voices count in solution-making. We need to embrace the

ASK, LISTEN and ACT Approach by White Ribbon Alliance which advocates for involving women in designing their healthcare solutions rather than acting on their behalf. We must stop sidelining and isolating recipients of care, assuming they do not know their own needs. Instead, we should embrace them as partners in creating solutions by asking them what they need, listening to them proactively and acting with them, not for them.

## ii. The challenge of competition

Another serious challenge limiting our potential in addressing women's reproductive health issues in their totality is our inability to acknowledge that we are all working towards a common goal – better healthcare outcomes for all women and girls. We are so much into our egos and the visibility of our logos to the extent that we forget that our mainstay should be women's health and wellbeing. We need to ask ourselves four (4) important questions:

- What are we doing?
- Who are we doing it for?
- How can we do it in a more friendly way?
- Who are the other actors that we should collaborate with in doing this?

*"We often fail to recognize that both users and providers of care share a common goal: improving health outcomes. Overlooking this shared objective causes us to compete rather than collaborate." ~ Ms. Angela Nguku*

## iii. Siloing of women's health issues

Women's health encompasses a wide range of components, including sexual health, pregnancy and childbirth, birth control, cancers, and maternal health. A significant challenge arises when we address these components separately instead of integrating them. By taking a holistic approach, we can save time and resources while effectively addressing overlapping challenges.

## iv. Wrong approach in addressing women's health issues

Borrowing from the learnings of the "What Women Want" and the health and wellbeing campaign by White Ribbon Alliance, quality of wellbeing means many different things for women. Quality of wellbeing for women encompasses issues such as climate change, economic power, how women are treated in health facilities, women's decision-making power at household level, infrastructural networks, security, agriculture, water, sanitation and hygiene etc.

A significant disconnect occurs when policymakers design programs without considering the broader social determinants of healthcare. We must look beyond traditional health determinants to holistically address women's health issues.

## Optimizing partnerships for women's health – The four (4) P's framework

Partnerships for women's health should incorporate four critical aspects, forming a comprehensive and holistic framework. Research and innovation should complement this framework to effectively embed solutions:

### a. People

Partnerships for women's health must be centered around people, the users of care, who are the true experts. It's crucial to consider people as active participants in all partnerships.

### b. Practice

Healthcare workers and providers are essential components of partnerships. They deliver care in communities and are also key decision-makers, making their inclusion in partnerships vital.

### c. Policy

Policymakers play a crucial role in driving the solution-making process within partnerships. They should adopt the ASK, LISTEN, and ACT approach by involving women in designing their healthcare own solutions rather than making decisions on their behalf.

### d. Products

Products are a significant aspect of partnerships, directly linked to manufacturers who are key drivers of these collaborations. Manufacturers should ensure that the products and diagnostic solutions they create meet the needs of the people.



**Ms. Gladys Mugambi**  
Head of Health Promotion & Education, Ministry of Health, Kenya

## Ministry of Health – Kenya's views on existing gaps in women's health and their causes

### i. Limited resources

Representing the government voice and vision, Mrs. Gladys Mugambi shed light on how women face numerous health-related challenges and require access to comprehensive, quality healthcare services. These services should address all their needs, including maternity care, good household nutrition, access to contraceptives, immunizations, fistula and pre-eclampsia care, and more. However, due to competing priorities and the extensive range of healthcare needs for women, governments often lack the resources to address all these needs. Consequently, they rely on partnerships and collaborations with the private sector to leverage

both financial and human resources, optimizing healthcare for women.

## ii. Information gaps

Governments often focus on communication through media channels, neglecting direct engagement with women at the grassroots level to understand their actual problems. This creates significant challenges, leaving many women uninformed about what they need to do to improve their health outcomes.

## iii. Collaboration across ministries

Some healthcare issues for women intersect multiple government ministries. For instance, the human papilloma virus (HPV) vaccination requires joint interventions from both the Ministry of Health and the Ministry of Education, as it involves school-going girls. To ensure healthcare solutions are responsive to women's needs throughout their lives, it is crucial that policies from different ministries are interconnected, enabling swift and effective implementation.

## iv. Emergency response challenges

Addressing women's healthcare needs during emergencies poses serious challenges for many African governments. Unforeseen crises such as wars, floods, and droughts often disrupt access to reproductive healthcare solutions, leaving women without necessary support. Emergency preparedness plans should be developed in partnership with the private sector to complement government efforts during crises.

## v. Distribution of commodities

Given the diverse healthcare needs of women and the logistical challenges in addressing these issues, some commodities and services by the Ministry of Health do not reach all women. This is where partnerships play a crucial role in improving healthcare access, building capacity for healthcare workers, and ensuring the distribution of essential commodities to women in hard-to-reach areas.

## vi. Disjointed implementation of projects

The introduction of new solutions and products for women's health often comes with challenges. Sometimes, when new products are introduced, private sector actors engage communities and roll out the solutions while the government continues with previous initiatives. There is a lack of joint plans to accelerate the implementation of new solutions and programs. The government develops plans for implementing healthcare solutions for women almost every year, and it is time they involve all actors, including the private sector, in crafting joint plans to accelerate the implementation of these solutions.

## vii. Competing priorities and resource management

Due to competing priorities within governments, disruptions often occur in the resources allocated for women's health. Many issues women face extend

beyond health, and it is necessary to collaborate with other sectors to address these social issues effectively.

*"We must collaborate to empower women, ensuring they can access healthcare services when needed and address the challenges they face at the household level." ~ Mrs. Gladys Mugambi*



**Mr. Kigen Korir**  
SRHR and Youth  
Advisor, UNFPA  
Kenya

## Responsiveness of SRH services and barriers for young people

### i. Provider biases

Provider biases significantly impact the responsiveness of SRH services for young people in Africa. Healthcare providers sometimes have prejudiced attitudes towards adolescents seeking reproductive health services, often influenced by their personal beliefs or societal norms. These lead to judgmental or dismissive treatment, discouraging young people from seeking necessary care. Efforts to improve provider training and awareness are crucial to ensure that all adolescents receive respectful and unbiased care.

### ii. Cultural barriers

Cultural barriers are a significant challenge in the accessibility of SRH services for adolescents. Societal perceptions often stigmatize young people, especially adolescents, accessing reproductive health services. Many communities view such services as inappropriate for unmarried or young individuals, creating a hostile environment for adolescents seeking help. These cultural norms need to be addressed through community engagement and education to shift perceptions and support young people's health needs.

### iii. Lack of timely access to services in gender-based violence (GBV) cases

Timely access to services for GBV cases is a critical issue. Many young people who experience GBV face significant barriers in accessing immediate and appropriate care, including medical, psychological, and legal support. Delays in service provision can have severe consequences on their health and well-being. Strengthening GBV response mechanisms and ensuring rapid, youth-friendly services are essential steps in addressing this challenge.

#### iv. Age of consent in access to reproductive healthcare services

The age of consent for accessing reproductive healthcare services, particularly contraceptives, presents a barrier for many adolescents. In some regions, legal restrictions prevent young people from obtaining contraceptives without parental consent, limiting their ability to make informed choices about their reproductive health. Revising age of consent laws and policies to reflect the needs of adolescents can improve access and empower young people to make decisions about their health.

#### v. Poverty

Poverty exacerbates barriers to SRH services for adolescents. Period poverty, where young people cannot afford menstrual hygiene products, affects their health, education, and dignity. Additionally, poverty drives adolescents into transactional relationships, increasing their risk of sexual exploitation and abuse. Addressing the socioeconomic factors contributing to poverty, alongside improving access to affordable SRH services and products, is crucial in supporting the well-being of young people in Africa.

Addressing these issues requires a comprehensive and collaborative approach that includes policy reform, community education, and enhanced service delivery to ensure all adolescents have access to the care they need and deserve.

*“There is a lot of push back in the entire African region regarding sexuality education – for instance, are we sexualizing children by implementing sexual education in schools or are we empowering them to have the agency and control over their own reproductive health?” ~ Mr.*

**Kigen Kipkorir**

## CALL-TO-ACTION AND RECOMMENDATIONS

### The Path Forward

The webinar concluded with emphasis on the urgent need for continued collaboration to address women’s reproductive health issues in Africa. Five (5) key recommendations to drive action and ensure no woman or girl is left behind were given:

#### i. Empowering Women in Healthcare Design and Leadership

Women must be involved as active partners in designing healthcare solutions that address their specific needs, considering their diverse backgrounds. This would ensure that their voices are heard and their needs met, enhancing the effectiveness and sustainability of health interventions.

#### ii. Fostering Multi-Stakeholder Partnerships

There is need to strengthen collaborations between governments, private sector organizations, NGOs,

healthcare providers, and community leaders. Pooling resources, expertise, and innovations can tremendously improve healthcare delivery, especially for underserved and marginalized groups.

#### iii. Integrating Holistic Approaches to Women’s Health

Women’s health issues need to be addressed comprehensively, considering socio-economic, cultural, and environmental factors. This holistic approach promises to improve overall well-being by tackling interconnected health challenges more efficiently.

#### iv. Enhancing Resource Allocation and Accessibility

There is an urgent need to mobilize financial and logistical support from various sectors to ensure widespread access to essential healthcare services and products. Bridging gaps in resource distribution ensures healthcare reaches all women, particularly in hard-to-reach areas.

#### v. Promoting Youth-Friendly (SRH) Services

Policy reforms should be made to lower barriers for adolescents in accessing SRH services and provide comprehensive sexuality education. Empowering young people with knowledge and resources enables informed decisions about their reproductive health, reducing rates of unintended pregnancies and sexually transmitted infections.

### Commitment to Action

Collective efforts are crucial to advancing the AU Agenda 2063 and the Sustainable Development Goals. Implementing these recommendations will help stakeholders achieve universal health coverage and improve reproductive health outcomes for women across Africa, ensuring no woman or girl is left behind in the pursuit of better health and well-being.

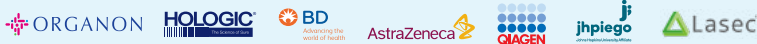






COWHA welcomes private and non-state organizations working in the health space to join this unique and exciting movement as members or strategic partners

For enquiries and discussion on how you can participate and be a member, email us on: **secretariat@cowha.net** or call us via **+254 704 838 150**



Member

The success of our coalition is anchored in the steadfast support and strategic collaboration of our distinguished members and partners. With shared objectives and a unified vision, we are diligently advancing women's and girls' health on the African Continent. It's important to note that all views expressed here are by COWHA and do not necessarily represent the views of the individual partners of the coalition.



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