

Background

- Integration of services for SRH is globally recognized as beneficial to both clients and health providers with improvements in quality and efficient use of resources.
- Decisions surrounding where and when to offer services as part of an integrated package have implications for health systems.
- Research is still needed to determine and demonstrate the value of SRH integration in different settings and situations.
- The Ministry of Health (MOH) Rwanda, in collaboration with its partners, continues to implement different strategies to accelerate the reduction of maternal mortality and to improve access to quality sexual reproductive health services.
- As part of these efforts, the MOH and Rwanda Biomedical Centre (RBC) collaborated with Bixby Center of the University of California, Berkeley to design and implement a model for integrating FP into all SRH services.

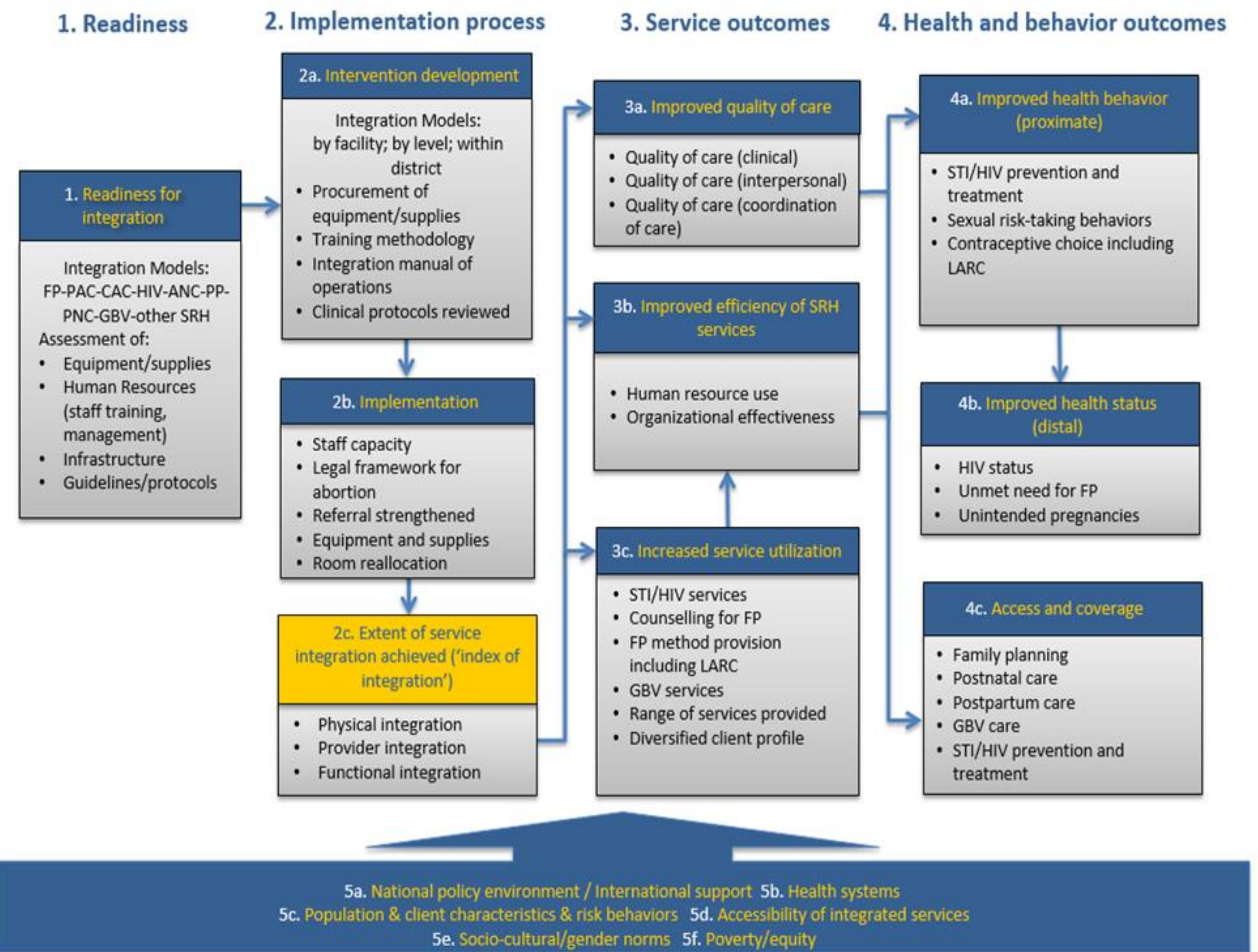
Program Intervention

A client-centered approach to provide high quality, integrated comprehensive abortion and post-abortion FP services with emphasis on LARC in 32 facilities in Huye and Musanze, with following activities:

1. Implement replicable integration package, including policies and strategies, provider trainings, job aids, and IEC materials in two districts;
2. Design and implement strategies to increase uptake of post-abortion FP, with special attention to LARC;
3. Ensure availability of supplies; and
4. Establish monitoring and evaluation system.

Conceptual Approach to Integration

Integrated Comprehensive Reproductive Health Services Initiative Conceptual Framework

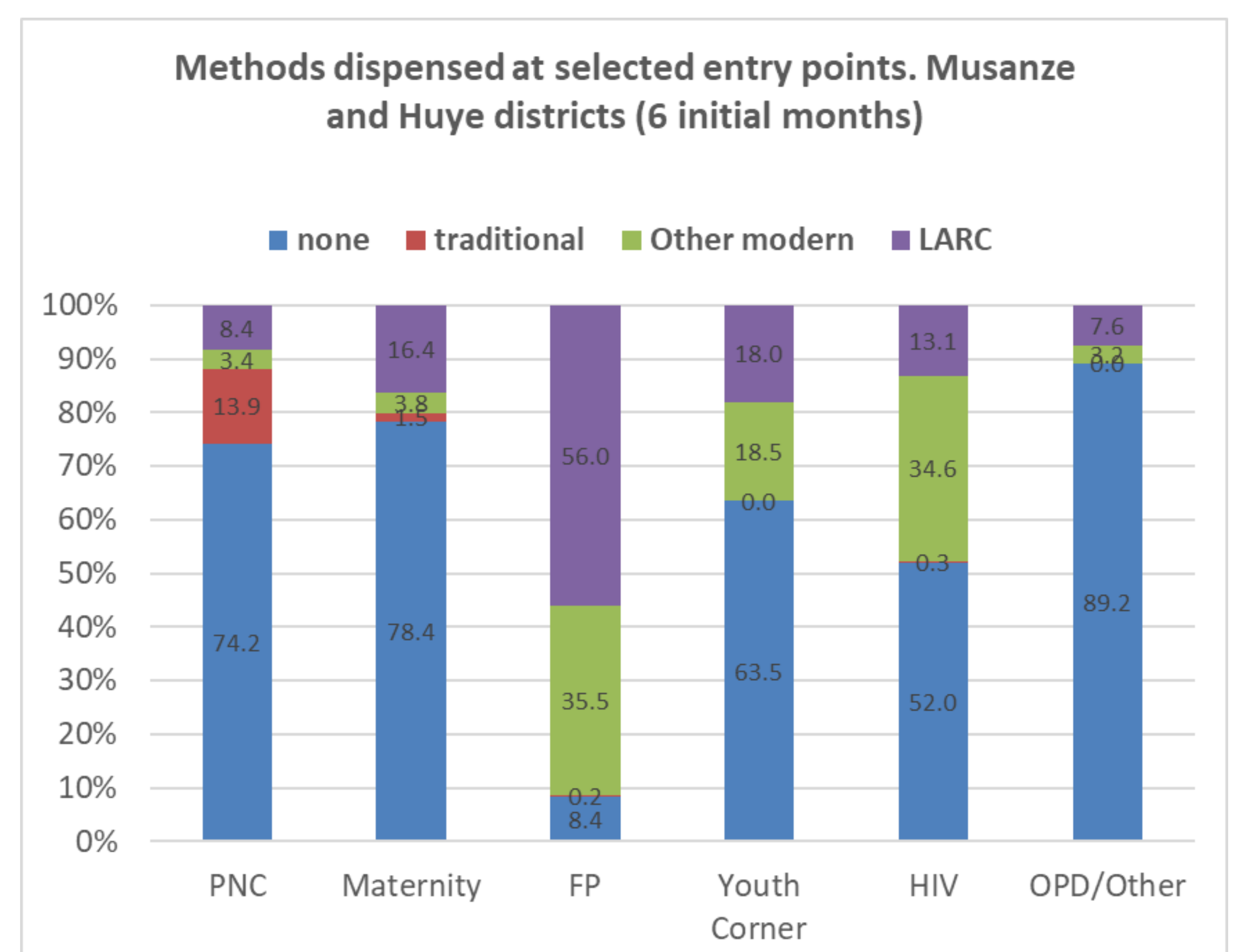
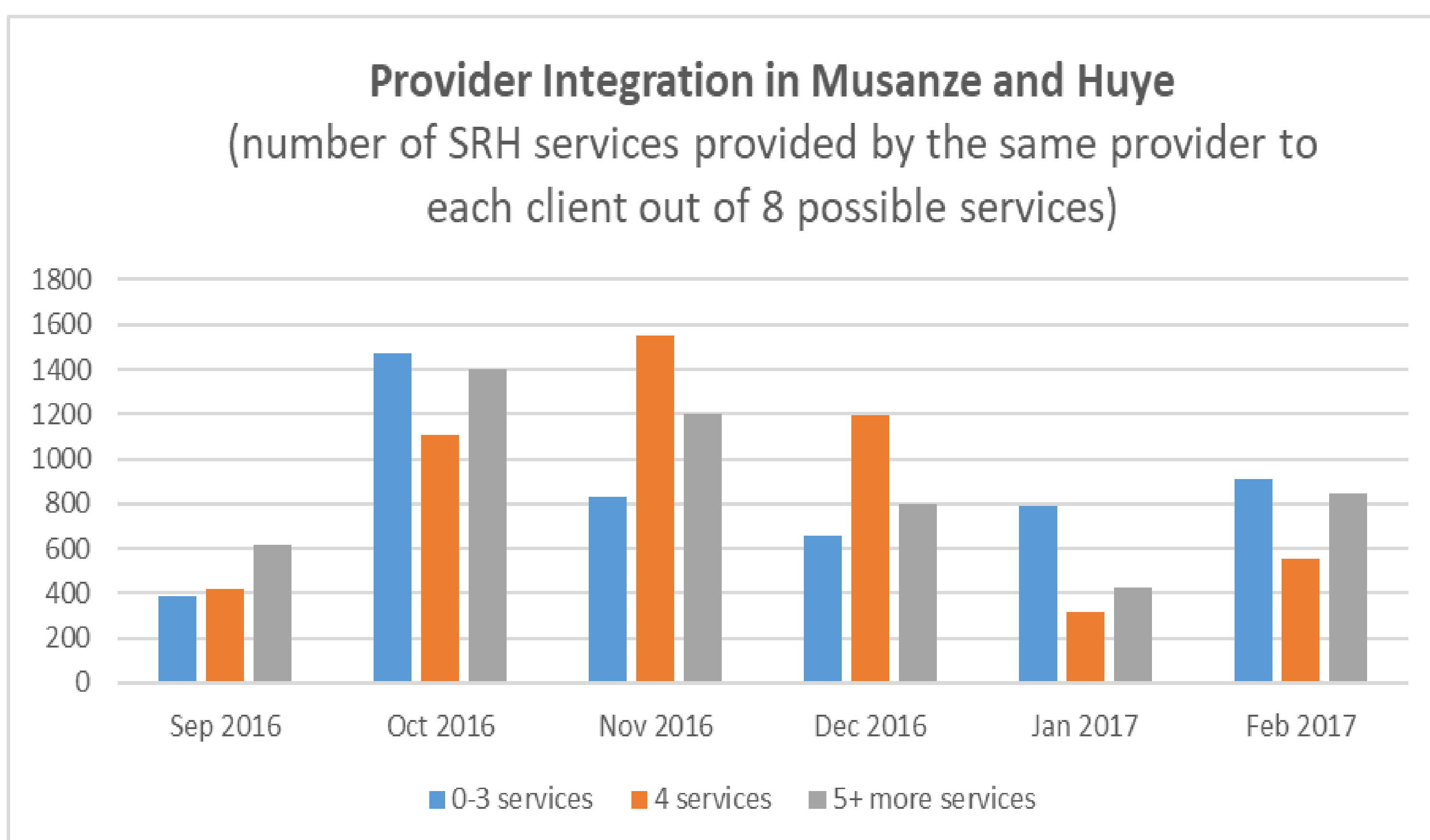


Adapted from Warren et al, BMC Public Health, 2013

Results

Table 1. Results at 6 months of implementation Musanze and Huye districts

	Total	Percentage
Total clients seen by a provider	15,421	100
ANC Clients (*all receive counseling)	4,885	31.7
Clients who received FP method among those eligible in public facilities (n=7,541)	4,181	55.4
Clients who received FP methods from entry points outside of FP services (n=4181)	1,597	38.2



Key Findings

- Effect of structural integration on uptake of different FP methods, particularly after abortion services, has not been adequately addressed
- Integration of SRH services leads to FP uptake, and particularly high LARC uptake, through different service entry points.
- This program exposed clients to different types of SRH care that they might not otherwise have been offered, and led to most eligible clients adopting a FP method.
- These data indicate that integration has a positive impact on client SRH service utilization among those who would not have used a traditional FP clinic.
- The measures determining successful integration increased over time, indicating that integration can be sustainably implemented.
- Integration factors demonstrated a statistically significant association with uptake of modern and LARC methods.
- Integrating FP services into other types of SRH care can lead to improved FP uptake.

