

Building Resilient Health Systems Through Rights-Based SRHR Programming in Somalia, Sudan and South Sudan.

Fact Sheet

Overview

Ipas implemented rights-based sexual and reproductive health and rights (SRHR) programming across Somalia, Sudan, and South Sudan under the WISH initiative. The Programme focused on strengthening post-abortion care (PAC), reducing stigma, building provider capacity, and enhancing civil society and media engagement in fragile and restrictive settings.

Key Achievements

- Finalized and updated Somalia's national PAC Guideline aligned with global standards
- Improved provider knowledge, attitudes, and practices through Values Clarification for Action Transformation (VCAT)
- Strengthened civil society coordination to respond to SRHR rollback
- Built capacity of journalists and stakeholders for accurate, rights-based SRHR reporting
- Sustained program delivery despite conflict and system constraints through adaptive approaches.

Country Spotlights

Somalia: Strengthening Post-Abortion Care Systems



- Supported review and finalization of national PAC guidelines aligned with international standards
- Introduced standardized clinical protocols, including misoprostol and manual vacuum aspiration
- Developed implementation tools: training curricula, job aids, supervision and monitoring tools
- Integrated trauma-informed, adolescent-friendly, and inclusive service approaches
- VCAT outcomes:
 - Knowledge increased from 62% to 71%
 - Supportive attitudes increased from 72% to 81%
 - Strengthened referral systems and community engagement on stigma reduction.



Sudan: Sustaining SRHR in Crisis



- Conducted VCAT and anti-rights training with Ministry of Health and SFPA staff
- Knowledge increased from 80% to 91%
- Attitudes improved from 85% to 89%
- Support for inclusive services increased from 88% to 94%
- Strengthened capacity to counter misinformation and anti-rights narratives
- Conducted Sustainable Abortion Ecosystem (SAE) assessment (classified as “emerging sustainability”)
- Maintained program continuity through adaptive strategies,
- Explored decentralized implementation and flexible funding to sustain services.



South Sudan: Strengthening Systems and Advocacy



- Conducted multiple VCAT workshops for healthcare providers
 - Knowledge increased by up to 10%
 - Attitudes improved by up to 11%
- Follow-up results:
 - Knowledge increased from 78% to 86%
 - Attitudes increased from 77% to 88%
- Strengthened civil society coordination and developed a Rapid Response Framework
- Supported formation and strengthening of SRHR CSO Network and advocacy structures
- Trained journalists to improve ethical, accurate SRHR reporting.



Cross-Cutting Results

- Strengthened alignment of PAC policies with global standards
- Improved provider competencies and service delivery practices
- Enhanced civil society advocacy and coordination
- Increased integration of gender equality and social inclusion
- Strengthened adaptive programming in fragile contexts.



Challenges

- Restrictive legal and policy environments
- Sociocultural stigma and discrimination
- Ongoing conflict and insecurity
- Weak health system infrastructure



Adaptations

- Remote and flexible program delivery
- Relocation of activities to safer areas
- Decentralized implementation through local partners
- Context-responsive programming approaches.



Key Lessons

- Values clarification is critical for transforming provider attitudes
- Community and religious leader engagement is essential
- Locally led approaches improve sustainability
- Integrated programming delivers stronger, long-term results.





Priorities for Next Period

- Roll out and institutionalize Somalia PAC guidelines
- Scale up VCAT and rights-based SRHR capacity building
- Strengthening civil society networks and advocacy
- Enhance monitoring, evaluation, and learning systems
- Expand community engagement to reduce stigma
- Mobilize resources for sustainability and scale

Conclusion

Despite complex operating environments, the program achieved significant progress in strengthening rights-based SRHR systems. Continued investment in policy, capacity building, and community engagement will be essential to expand equitable access to quality reproductive health services.

Ipas Partners for
Reproductive Justice
AFRICA
ALLIANCE

Contact:
Edward Ngoga
Ipas Africa Alliance
P.O. Box 1192 – 00200, Nairobi, Kenya
Tel: +254 722 200 449 | info@ipas.org | www.ipas.org