

Analysis of Reproductive Health

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Reproductive Health Indicators for Global Monitoring

- There are seventeen reproductive health indicators developed by the United Nation Population Fund (UNFPA).



1. Total fertility rate:

- Total number of children a woman would have by the end of her reproductive period, if she experienced the currently prevailing age-specific fertility rates throughout her childbearing life. TFR is one of the most widely used fertility measures to assess the impact of family planning programmes.



2. Contraceptive prevalence (any method):

- Percentage of women of reproductive age who are using (or whose partner is using) a contraceptive method at a particular point in time.



3. Maternal mortality ratio:

- The number of maternal deaths per 100 000 live births from causes associated with pregnancy and child birth.



4. Antenatal care coverage

- Percentage of women attended, at least once during pregnancy, by skilled health personnel for reasons relating to pregnancy.



5. Births attended by skilled health personnel:

- Percentage of births attended by skilled health personnel. This doesn't include births attended by traditional birth attendants.



6. Availability of basic essential obstetric care:

- Number of facilities with functioning basic essential obstetric care per 500 000 population. Essential obstetric care includes, Parenteral antibiotics, Parenteral oxytocic drugs, Parenteral sedatives for eclampsia, Manual removal of placenta, Manual removal of retained products, Assisted vaginal delivery. These services can be given at a health center level.



7. Availability of comprehensive essential

obstetric care

- Number of facilities with functioning comprehensive essential obstetric care per 500 000 population. It incorporates obstetric surgery, anesthesia and blood transfusion facilities.



8. Perinatal mortality rate:

- Number of perinatal deaths (deaths occurring during late pregnancy, during childbirth and up to seven completed days of life) per 1000 total births. Deaths which occur starting from the stage of viability till completion of the first week after birth (22 weeks of gestation up to end of first week after birth, (WHO).



9. Low birth weight prevalence

- Percentage of live births that weigh less than 2500 g.



10. Positive syphilis serology prevalence in pregnant women

- Percentage of pregnant women (15–24) attending antenatal clinics, whose blood has been screened for syphilis, with positive serology for syphilis.



11. Prevalence of anaemia in women

- Percentage of women of reproductive age (15–49) screened for haemoglobin levels with levels below 110 g/l for pregnant women and below 120 g/l for nonpregnant women.



12. Percentage of obstetric and gynaecological admissions owing to abortion

- Percentage of all cases admitted to service delivery points providing in-patient obstetric and gynaecological services, which are due to abortion (spontaneous and induced, but excluding planned termination of pregnancy)



13. Reported prevalence of women with FGM:

- Percentage of women interviewed in a community survey, reporting to have undergone FGM.



14. Prevalence of infertility in women

- Percentage of women of reproductive age (15–49) at risk of pregnancy (not pregnant, sexually active, noncontraception and non-lactating) who report trying for a pregnancy for two years or more.



16. HIV prevalence in pregnant women

- Percentage of pregnant women (15–24) attending antenatal clinics, whose blood has been screened for HIV, who are sero-positive for HIV.



17. Knowledge of HIV-related prevention practices

- The percentage of all respondents who correctly identify all three major ways of preventing the sexual transmission of HIV and who reject three major misconceptions about HIV transmission or prevention.



15. Reported incidence of urethritis in men:

- Percentage of men (15–49) interviewed in a community survey, reporting at least one episode of urethritis in the last 12 months.



Gender and Reproductive Health

- **Sex** refers to biological and physiological attributes of that identify a person as male or female
- **Gender** refers to the economic, social and cultural attributes and opportunities associated with being male or female in a particular social setting at a particular point in time.



- **Gender equality** means equal treatment of women and men in laws and policies, and equal access to resources and services within families, communities and society at large.
- **Gender equity** means fairness and justice in the distribution of benefits and responsibilities between women and men. It often requires women-specific programmes and policies to end existing inequalities.



Critical Analysis

- By Indicator
 - What?
 - When?
 - Why?

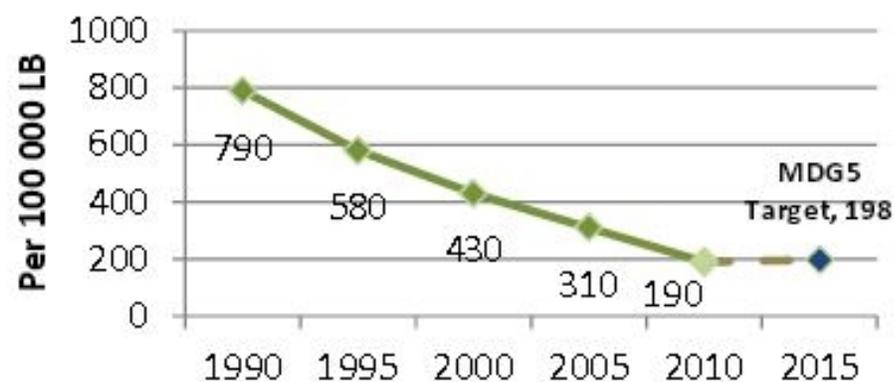


Maternal mortality

One of the eight Millennium Development Goals (MDGs) that has made some progress, albeit slow, is MDG 5: Improve maternal health. The two targets for assessing MDG 5 are reducing the maternal mortality ratio (MMR) by three quarters between 1990 and 2015, and achieving universal access to reproductive health by 2015.

Maternal mortality ratio (MMR): maternal mortality per 100 000 live births

% change in MMR between 1990–2013	-76
Average annual % change in MMR 1990–2013	-6
Range of uncertainty on annual % change in MMR (lower estimate)	-6.6
Range of uncertainty on annual % change in MMR (upper estimate)	-5.4
Progress towards improving maternal health	On track
MDG 5 target by 2015	197.5

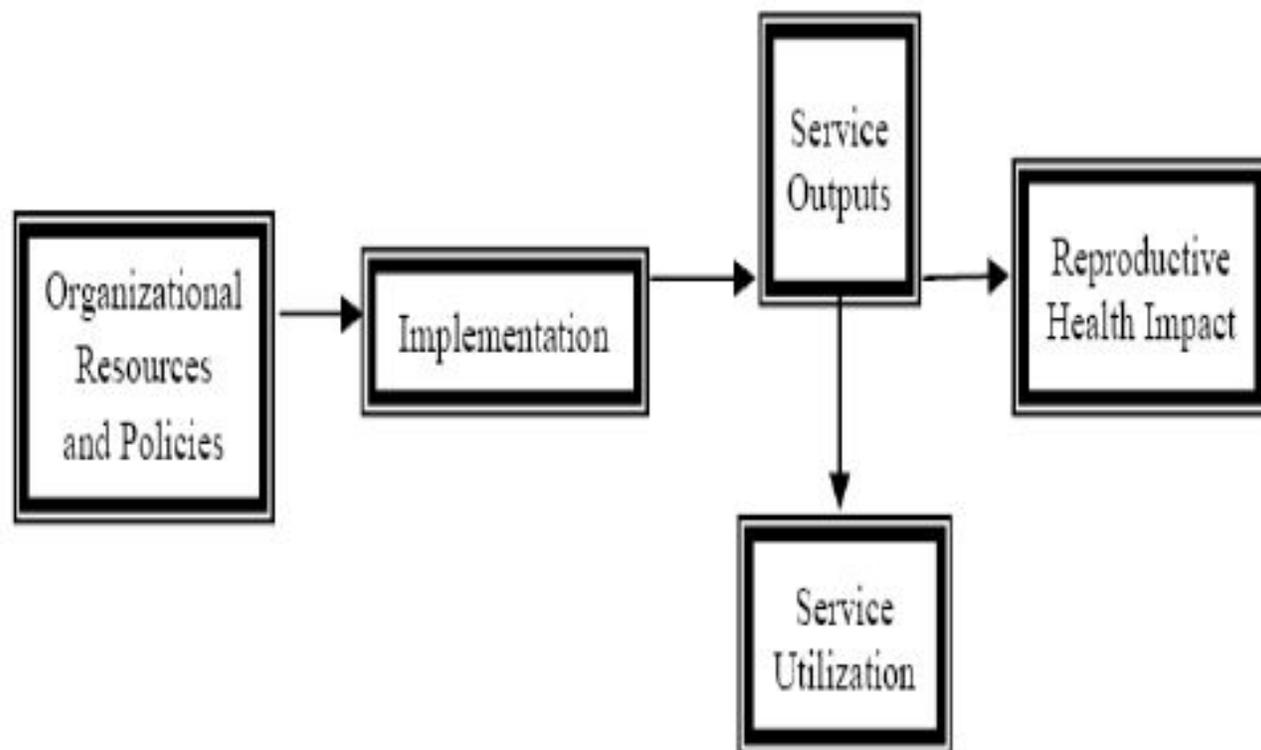


Note: Consultations with countries were carried out following the development of the MMR estimates. The purposes of the consultations were primarily: to give countries the opportunity to review the country estimates, data sources and methods; to obtain additional primary data sources that may not have been previously reported or used; and to build mutual understanding of the strengths and weaknesses of available data and ensure broad ownership of the results.

Source: WHO, UNICEF, UNFPA and The World Bank estimates. *Trends in maternal mortality: 1990 to 2013*.

Reproductive Health

Figure 1: A Conceptual Framework for Monitoring and Evaluating Reproductive Health Programme Components



Inputs

Resources

Manpower

Material

Finance

Process

Services

Contacts

Visits

Examinations

Morbidity

Referrals

Outputs

Results

Knowledge

Acceptance

Practice

Utilization

Prevalence

Outcomes

Impacts

Fertility

Mortality

Morbidity



References

- Feleke Worku, Samuel Gebresilassie (2008)
Reproductive Health For Health Science Students,
University of Gondar

