



# Family Planning and Comprehensive Abortion Care: Strengthening Pre-service Training

Assimilation of Contraception into Universal Health Coverage

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## Background:

Several countries globally have gradually intensified their quests for Universal Health Coverage for their citizens for one main reason; to ensure that quality health services are accessible on demand by everybody without financial constraint. It attempts to reduce out-of-pocket expenditures, founded on the universality & importance of health, including reproductive health as a human right.

UHC success has been tipped to emerge from preventive health services above curative. Recent abortion statistics indicate every year approximately 22 million women procure unsafe abortions, with 98% of this in developing countries. In Kenya, 2012, 464,000 induced abortions occurred, and are assumed to have increased over the years, squarely why the unmet need for contraception and family planning fall widely here.

## Objectives:

To streamline contraception into mainstream health services for Universal Health Coverage.

## Methodologies:

- 1. Insurance: Government- sponsored insurance in ways like;**
  - Subsidies/vouchers to help cover the poor and specific target groups
  - Partnership packages with private firms e.g. commodity stocks, quality.
- 2. Budgetary shift focus from curative services to preventive, including contraception.** Public funds and health financing should be able to facilitate this strategy.

## Results:

1. More people access contraceptive health services, CAC and PAC.
2. The importance of contraception is highlighted, myths demystified and uptake increased.
3. Unmet need for contraception is reduced, leads to a drop in unwanted pregnancies and reduced unsafe abortions.

## Policy Implications and recommendations:

A streamlined system of contraceptive health into primary healthcare adds up to preventive health. By this, the growing demand for contraception meets access and reproductive health is promoted.

In order to have this provision, contraceptive health should be assimilated and provision of services on demand should be available out-of-pocket and/or with insurance for an all inclusive citizens health.