



Fast Facts

Country: Kiribati; Marshall Islands; Solomon Islands; Tuvalu; Vanuatu

Duration: April 2001 to March 2005

Implementing UN Agencies: UNFPA

Other Implementing Partners: WHO; National Ministries of Health; University of the South Pacific

Budget: \$1,587,833.12

Key Words: Access to health care; women

BACKGROUND

The 22 island countries of the South Pacific are spread out over a vast geographical area and comprise a wide variety of ethnic, cultural and linguistic groups. Development in these countries has been constrained by small domestic markets, lack of resources, heavy dependence on external aid and vulnerability to external shocks and natural disasters. Moreover, continuous lack of access to basic social services, including health care, had for long presented the South Pacific Island countries with many challenges to which women were often particularly vulnerable. As a result, starting in the late 1990s, the reproductive

health (RH) status of women showed a sharp decline in the region, marked by a dramatic rise in sexually transmitted infections (STIs), HIV/AIDS and unwanted pregnancies. The cause of this change was not entirely understood. However, citing data from the Secretariat of the Pacific Community, WHO identified the lack of access to RH services, high unemployment rates, alcohol and drug abuse, as well as changing social norms and the breakdown of traditional family and economic structures to be the contributing factors for this change.

PROGRAMME OVERVIEW

GOALS AND OBJECTIVES

Targeting five priority countries in the South Pacific region (Kiribati, Marshall Islands, Solomon Islands, Tuvalu and Vanuatu), the project aimed to stem the growing prevalence of STIs, HIV/AIDS and unwanted pregnancies. To reach this objective, the project set

out to increase the access to RH care in the participating countries through an integrated cross-country RH service delivery system that took into account local contexts and country-specific challenges.

BENEFICIARIES

In all of the five participating countries, women benefited from the expanded RH services and emergency RH care, and gained knowledge of the risks related to STIs and HIV/AIDS through awareness-raising activities. In addition, health workers, nurses and midwives attended workshops

and received training on RH, STIs and HIV/AIDS, as well as maternal health and family planning. Lastly, the project provided technical support to service providers and distributed contraceptives and medical equipment to hospitals in the participating countries.