

MAXIMIZING THE IMPACT ON REPRODUCTIVE, MATERNAL, NEWBORN AND CHILD HEALTH (RMNCH)

INFORMATION NOTE

Introduction

HIV/AIDS, tuberculosis (TB) and malaria place heavy burdens on the health of women and children. While progress has been made, global targets for reducing child mortality and improving maternal health have not been met in many parts of the world. In response, the Global Fund Strategy 2012–2016, Investing for Impact, includes the following strategic action:

Strategic Action 1.4: Maximize the impact of Global Fund investments on improving the health of mothers and children.

The Global Fund's new funding model strongly encourages applicants to include reproductive, maternal, newborn and child health (RMNCH) interventions relevant to HIV/AIDS, TB and malaria in their concept notes.

This Information Note builds upon these recommendations and highlights opportunities for securing Global Fund support to address RMNCH issues. After providing background information about the Global Fund's mandate in this area, this information note outlines three key steps in designing programs to maximize the impact on mothers and children, and summarizes priority RMNCH interventions within the Global Fund mandate.

RMNCH Interventions and the Global Fund Mandate

In addition to its mandate to fight AIDS, TB and malaria, the Global Fund seeks to support progress toward Millennium Development Goal (MDG) 4, reducing child mortality, and MDG 5, improving maternal health. There are many known RMNCH interventions that improve the health of women and children affected by HIV/AIDS, TB and malaria. Annex 1 outlines priority RMNCH-related interventions in disease-specific areas that support the Global Fund mandate.

The Global Fund also recognizes other synergistic RMNCH interventions that not only address HIV, TB and malaria, but go beyond the three diseases. These integrated service packages represent excellent opportunities to maximize impact on the health of women and children, with minimum additional investments. They are recognized as evidence-based priority RMNCH interventions that are cost-effective. Successful service integration could lead to higher service utilization and more effective coverage of HIV/AIDS, TB, malaria and RMNCH interventions. Key synergistic interventions include the following: screening and treatment of syphilis in pregnancy, family planning, non-malaria febrile illness among children, promotion and support for breastfeeding, and child nutrition. For example, investing in comprehensive febrile illness management can eventually reduce the money wasted on overuse of artemisinin-based combination therapy. These synergistic interventions should be discussed during the country

dialogue and included in concept notes, where appropriate. Annex 2 lists the modules that support these synergistic interventions.

The Technical Evaluation Reference Group (TERG) conducted a recent thematic review of the Global Fund's contributions to MDGs 4 and 5. The TERG identified five key recommendations that can help to maximize the impact of Global Fund investments on improving RMNCH (see Box 1).

Box 1: Five key recommendations to maximize the impact of Global Fund investments to improve the health of mothers and children

- **Reliable and balanced funding** for the three diseases and RMNCH components is crucial for sustaining integration.
- **Training health workers** to treat multiple conditions (e.g. malaria and pneumonia) from the outset helps to avert missed opportunities.
- Because uptake of key interventions remains low (e.g. antenatal care), **addressing demand-side barriers** is critical to increase coverage of integrated services.
- **Integrated, well-functioning supply chains** are central to successful service delivery; without these, coverage and quality of services will remain poor.
- **Integrated health management information systems (HMIS) and monitoring and evaluation (M&E)** create efficiencies and can improve program impact, data collection systems and the capacity of human resources.

Designing Programs to Maximize the Impact on Mothers and Children

Step 1: Ensure RMNCH stakeholders are part of the country dialogue

The country's national strategic plan forms the foundation of the funding application. It is important that this be developed through an inclusive country dialogue process that includes key RMNCH stakeholders. Key questions to be addressed are listed in Box 2.

Box 2: Key questions to be addressed in an inclusive country dialogue

- Is the country sufficiently supporting RMNCH interventions that directly impact HIV/AIDS, TB and malaria (e.g. preventing mother-to-child transmission (PMTCT), Intermittent preventive treatment in pregnancy (IPTp), integrated community case management (iCCM)?
- Is the country considering synergistic RMNCH interventions that are highly relevant to HIV/AIDS, TB and malaria (e.g. family planning, non-malaria components of iCCM)?
 - How are these synergistic RMNCH interventions funded and implemented in the country?
 - Is there any potential complementarity with government allocations and other donors' investments into synergistic RMNCH interventions?
- Is health systems strengthening (HSS) funding supporting the key elements of effective RMNCH service integration (e.g. service delivery integration through the antenatal care platform)?
 - Is there a national policy that could be used as a basis for allocating HSS and/or HIV/TB/malaria funding to RMNCH interventions?

Step 2: Include RMNCH in the situational and gap analyses

Applicants need to decide which RMNCH interventions are the “best fit” to maximize outcomes in the country, and where to include these various interventions in the concept notes. A key starting point will be the latest epidemiological information, as a basis for ensuring appropriate prioritization of interventions. As part of the “full expression of demand”, it will be important to summarize the country’s RMNCH goals, targets and strategic priorities and to present these as part of the concept note or as an annex. Where possible, also include estimates on mortality and morbidity averted by each of the proposed RMNCH interventions to demonstrate value for money.

The World Health Organization (WHO) and partners have published an updated version of the **WHO Technical Guidance Note: Strengthening the inclusion of reproductive, maternal, newborn and child health (RMNCH) in concept notes to the Global Fund** to assist country teams and stakeholders with these analyses. WHO’s RMNCH Technical Guidance Note provides further details, including key technical information and normative guidance, and should be used jointly with this information note.

Co-financing with partner organizations

In order to maximize its impact on the health of mothers and children, it is critical for Global Fund investments to be closely aligned with other resources, meaning additional resources **above and beyond the country allocation**. The Global Fund is examining opportunities for country-level co-financing with partner organizations in settings where there are existing Global Fund-supported HIV, TB or malaria programs. The following are examples of new partnerships:

UNICEF and UNFPA: The Global Fund is in the process of entering into a partnership agreement with the United Nations Children’s Fund (UNICEF) and the United Nations Population Fund (UNFPA) to maximize the availability of essential medicines and commodities to complement Global Fund grants. These medicines and commodities include:

- antibiotics, oral rehydration salts and zinc for pneumonia and diarrhea treatment (to complement Global Fund malaria inputs); and
- iron, folic acid, deworming pills, contraceptives, syphilis screening tests and treatment for pregnant women (to complement Global Fund inputs for HIV and malaria).

For example, the Secretariat is working with the Principal Recipient, UNICEF, and the National Malaria Program in the Democratic Republic of Congo to support iCCM through the malaria grant. UNICEF will cover pneumonia and diarrhea commodities and family kits, ensuring delivery of a comprehensive package.

World Bank: Global Fund investments for HIV, TB and malaria can support broader health platforms with an RMNCH focus, such as the results-based financing (RBF) programs funded by the World Bank.

- Partner organizations, including the Global Fund, and governments have supported RBF programs in the following ways:
 - by purchasing results of specific RBF indicators in a country (e.g. Rwanda);
 - by purchasing RBF results for a comprehensive package of RMNCH services in a specific geographic area within a country (e.g. Benin, Burundi, Senegal);
 - by financing technical assistance and support for RBF design and implementation in a country (e.g. Haiti, Tajikistan);
 - by supporting accompanying interventions, such as for investments in the HMIS system (Zimbabwe) or for commodities and the supply chain.
- Use of Global Fund support to scale up successful RBF projects in a country can be explored in collaboration with the World Bank Health Results Innovation Trust Fund and government clients.

RMNCH Trust Fund: The RMNCH Trust Fund provides catalytic funding to support strategies and interventions that can accelerate progress toward RMNCH objectives in selected countries.

- The Trust Fund resources are not earmarked and can be used to provide technical assistance or health systems strengthening (HSS), to purchase essential medicines and commodities, or to explore innovative ways to deliver RMNCH services.
- This funding channel can complement RMNCH activities that cannot be funded by the Global Fund but which are necessary for the success of the Global Fund portfolio.
- Applicants may enquire through the H4+ (UNAIDS, UNFPA, UNICEF, UN Women, WHO, World Bank) lead organization in that country to find out whether this Trust Fund is available there.

Step 3: Prioritize key RMNCH interventions in concept notes

Applicants will be completing the modular template, which is a disease-specific, high-level costed plan of interventions and activities linked to indicators. Annex 1 provides a list of RMNCH-relevant modules and interventions supported by the Global Fund.

In addition, applicants should identify opportunities for improving the effective delivery of health services through HSS investment. The Global Fund encourages the use of Global Fund support for integrated service delivery platforms, particularly to benefit women and children.

Wherever possible, applicants should also explore government and other partner co-financing to deliver these interventions.

Additional Considerations

Technical assistance and programmatic guidance in RMNCH

Applicants may require support to ensure that RMNCH is part of the ongoing country dialogue. Technical partners can assist countries in highlighting RMNCH needs and related costs, as well as in identifying key interventions that are evidence-based and cost-effective. Technical assistance may also be needed for writing concept notes that include the RMNCH priorities. The need for assistance should be noted and addressed as early in the process as possible. Partners can provide advice on identifying and funding technical assistance.

Engaging in operational research in RMNCH

Applicants should consider engaging in operational research to help explore and strengthen the evidence on the optimal delivery systems for RMNCH integration at the program level.

Using Health Systems Strengthening Investments for Improved RMNCH Outcomes

HSS investments contribute to addressing health system constraints that hinder the effective and efficient delivery of the disease programs. Under the new funding model, the Global Fund is prioritizing five specific components of the health system for investment: **procurement and supply chain management, health management information systems, health and community workforce, service delivery and financial management.**

HSS funding applications should clearly describe the synergies between HSS investments and RMNCH outcomes. Interventions that strengthen service delivery points where integrated packages can be delivered (i.e. to ensure that women and children receive comprehensive care in one location) will be given favorable consideration during the review process.

Examples of how Global Fund investments can support HSS for improved RMNCH are provided in Table 1.

Table 1: Health systems strengthening for improved RMNCH outcomes

Module	Link to RMNCH	Country example
Service delivery	Addressing comprehensive management of childhood febrile illness, including malaria and pneumonia, through health facilities and community health systems	In the Democratic Republic of Congo, the Global Fund covers 219 out of 515 Health Zones with its support for integrated community case management (iCCM) of malaria, pneumonia and diarrhea. The Global Fund is supporting malaria commodities and training of community health workers. UNICEF is funding pneumonia and diarrhea commodities and providing family kits.
Service delivery	Strengthening antenatal care (ANC) for the delivery of comprehensive RMNCH programs such as prevention of mother-to-child transmission (PMTCT), prevention and treatment of congenital syphilis, prevention and case management of maternal malaria and prevention of maternal anemia and malnutrition	In Kenya, the Global Fund provided funding for integration of PMTCT services into ANC, provision of intermittent preventive treatment in pregnancy (IPTp), and integration of TB screening services into PMTCT services. To address demand-side barriers, the Global Fund supports the waiving of fees for skilled-care deliveries, encouraging poor women to give birth at health facilities.
Service delivery	Integrating sexually transmitted infections (STIs) (particularly syphilis) and HIV services through laboratory strengthening and service integration	In Mongolia, the Global Fund, together with other partners, supported procurement of rapid diagnostic tests for syphilis. This allowed provision of a one-stop service, which increased the detection and treatment rates, and effectively reduced the rate of congenital syphilis.
Service delivery	Supporting broader RMNCH health platforms to improve service delivery of HIV/AIDS, TB and malaria programs	In Rwanda, the Global Fund contributed to the general pool of performance-based financing funds to support facility-based delivery. Health facilities and community health workers were offered rewards for increasing the rate of facility-based deliveries, which successfully led to an increase in the rate, thus overcoming one major barrier to scale-up of PMTCT.
Procurement and supply chain management (PSCM)	Strengthening and integrating supply chain management to ensure reliable availability of essential RMNCH and disease-specific commodities at the point of treatment	In Zimbabwe, the Global Fund is supporting a “whole supply chain” approach (integrated supply chain strengthening) and the development of a supply chain action plan.

Module	Link to RMNCH	Country example
Health management information systems (HMIS) and monitoring and evaluation (M&E)	Ensuring health information systems capture service delivery and health outcomes for women and children	In Ghana, the Global Fund supports the District Health Management Information System (DHMIS) – online software that allows reporting of unified routine health information, including RMNCH outcomes.
Health workforce	Integrated training of health care providers and joint supervision to address RMNCH, HIV/AIDS, TB and malaria interventions together	In Ethiopia, the Global Fund currently supports a 28-day integrated refresher training course for health extension workers (HEWs). These training courses are aimed at improving HEWs' basic skills and knowledge to support improved provision of preventive and curative RMNCH services (including sanitation and nutrition), as well as prevention and case management of major communicable diseases such as HIV, TB and malaria. The Global Fund co-funds this training with the Ethiopian government and other partners.

Further details on integrating RMNCH interventions in the five priority areas for HSS are available in the **Global Fund Information Note on Health Systems Strengthening**.

Demonstrating Results and Impact

RMNCH interventions will be assessed by the performance of the targeted health system components, as well as by relevant health outcomes in HIV, TB and/or malaria. Applicants can use the indicators listed in the Modular Template. If appropriate, additional indicators may be developed to fully capture the breadth and depth of interventions supported by the Global Fund, including indicators to monitor performance at the operational, strategic and policy implementation levels. However, the Global Fund recommends that the measurement of RMNCH outcomes be an integral part of the country's national health information system.

Applicants are also encouraged to document best practices. They should consider engaging in operational research on how best to measure the impact of Global Fund investments on RMNCH outcomes.

Annex1: RMNCH-related Interventions Included in Disease Modular Templates

HIV/AIDS

Module	Intervention	Description of intervention package
Prevention (general population)	Condom promotion	Promotion of male and female condoms for HIV prevention, including links to behavior change programs
	Diagnosis and treatment of STIs	Design, development and implementation of syndromic and clinical management programs for STIs
	Orphan and vulnerable children (OVC) package	Design and implementation of programs aimed at strengthening the capacity of families to protect and care for OVC
	RMNCH linkages and gender-based violence (GBV)	Design, development and implementation of gender-responsive, women- and girl-focused HIV services , including prevention of and responses to GBV, integration of HIV services into RMNCH services, and promotion of sexual and reproductive health (SRH)
Prevention (sex workers and their clients)	Diagnosis and treatment of STIs as part of programs for sex workers and their clients	Design, development and implementation of syndromic and clinical management programs for STIs , including links to reproductive health services
	Harm reduction as part of programs for sex workers and their clients	Design, development and implementation of gender-responsive, sex-work-friendly services , including prevention of and responses to GBV, provision of RMNCH services, and promotion of SRH
Prevention (adolescents and youth, in and out of school)	Behavioral change as part of programs for adolescents and youth	Design, development and implementation of behavioral change programs aimed at young people , including: individual-level and community-level behavioral interventions, targeted internet-based strategies, social marketing-based strategies, sex-venue-based outreach strategies (including peer education, life skills and risk-reduction skills)

Module	Intervention	Description of intervention package
	Condom promotion as part of programs for adolescents and youth	Promotion of condoms for sexually active young people , including demand creation, training and distribution
	HIV testing and counseling (HTC) as part of programs for adolescents and youth	Design, development and implementation of youth-friendly HTC programs , including provider-initiated, client-initiated and community-based HTC, mobile services and partner testing (including demand creation, training, and links and referrals to care and treatment)
	RMNCH linkages and GBV as part of programs for adolescents and youth	Design, development and implementation of gender-responsive, youth-friendly services , including prevention of and responses to GBV and violence against children, provision of youth-friendly RMNCH services, and promotion of SRH
Prevention of mother-to-child transmission (PMTCT)	Prong 1: Primary prevention of HIV infection among women of reproductive age	Design, development and implementation of programs aimed at primary prevention of HIV among women of reproductive age within reproductive health services such as antenatal care, postpartum care and other health and HIV service delivery points, including screening with either single or dual HIV and syphilis rapid tests, dual protection contraceptive choices, HIV and STI services for male partners, and community outreach services
	Prong 2: Preventing unintended pregnancies among women living with HIV	Design, development and implementation of reproductive health programs targeting women living with HIV , including links and referrals
	Prong 3: Preventing mother-to-child HIV transmission	Design, development and implementation of programs aimed at PMTCT , including HTC, provision of ART, interventions along the continuum of care during pregnancy, delivery and breastfeeding (please include provisions for options A and B)
	Prong 4: Treatment, care and support to mothers living with HIV and their children and families	Design, development and implementation of programs aimed at providing HIV care, treatment and support for women found to be HIV-positive and their families, including early infant diagnosis (EID)

Module	Intervention	Description of intervention package
Treatment, care and support	Antiretroviral therapy (ART)	Design, development and implementation of ART programs (with the exception of prophylaxis under options A and B, which are included in the PMTCT module); this includes first, second and third-line for both adults and children , treatment as prevention and provisions for the expansion of option B+, as well as pre- and post-exposure prophylaxis, and links and referrals to care and support
TB/HIV	Key affected populations	Active case finding among key affected populations and high-risk groups such as children and pregnant women ; this includes adaptation of services to the needs of specific groups to make services people-centered and improve accessibility, appropriateness and availability, and also adaptation of diagnostic and treatment structures to meet the needs of key populations (e.g. through community-based TB care and prevention, mobile outreach to remote areas, community-based sputum collection, sputum transport arrangements, etc.)
	Collaborative activities with other programs and sectors	Collaboration with other service providers for patients with co-morbidities including RMNCH

Tuberculosis (TB)

Module	Intervention	Description of intervention package
TB care and prevention	Case detection and diagnosis	Early detection of all forms of TB among all ages (including women and children) , including diagnosis of TB using sputum smear microscopy and rapid molecular tools for early and rapid diagnosis, and use of other tools (e.g. X-rays) to support diagnosis among smear-negative and extrapulmonary TB cases, children and people living with HIV, as well as activities related to strengthening the delivery of TB services , such as renovating and equipping laboratory infrastructure
	Prevention	Provision of isoniazid preventive therapy for children in contact with biologically confirmed TB cases , including administrative controls for infection control
TB/HIV	TB/HIV collaborative interventions	Implementation of the 12 elements of TB/HIV collaborative activities that are aligned with the HIV program

Module	Intervention	Description of intervention package
TB care and prevention, TB/HIV and multidrug-resistant TB	Key affected populations	Active case finding among key affected populations and high-risk groups such as children and pregnant women; this includes adaptation of services to the needs of specific groups to make services people-centered and improve accessibility, appropriateness and availability, and also adaptation of diagnostic and treatment structures to meet the needs of key populations (e.g. through community-based TB care and prevention, mobile outreach to remote areas, community-based sputum collection, sputum transport arrangements, etc.)
	Collaborative activities with other programs and sectors	Collaboration with other service providers for patients with co-morbidities including RMNCH

Malaria

Module	Intervention	Description of intervention package
Vector control	Long-lasting insecticidal nets (LLINs) – mass campaign	Planning and implementation of mass LLIN distributions, whether targeted to specific population groups (i.e. pregnant women and children) or for universal coverage ; activities include coordination, planning, budgeting, procurement, logistics, communication, implementation, training, etc.
	LLINs – continuous distribution	Efforts to start, strengthen or scale up continuous delivery of LLINs through antenatal care clinics, the Expanded Programme on Immunization (EPI) or other routine services at public and private health facilities, to sustain high LLIN coverage; activities include coordination, planning, training, logistics, communication, supervision, etc.
	Information, education and communication (IEC)/behavior change communication (BCC)	Advocacy, communication and social mobilization activities related to vector control
Case management	Facility-based treatment	Testing and treatment of malaria cases , including activities such as procurement of diagnostic equipment (e.g. rapid diagnostic tests, reagents) and antimalarial medicines, quality assurance of laboratories, training of health care providers and provision of technical assistance

Module	Intervention	Description of intervention package
	Integrated community case management (iCCM)	Testing and treatment of malaria cases at the community level , including activities such as procurement of rapid diagnostic tests and antimalarial medicines, training of health care providers and provision of technical assistance
	Severe malaria	Treatment for severe malaria cases , including activities such as procurement of antimalarial medicines, support to blood transfusion services, training of health care providers and provision of technical assistance
Specific prevention interventions	Intermittent preventive treatment – in pregnancy (IPTp)	Procurement and provision of intermittent preventive treatment with sulfadoxine-pyrimethamine during pregnancy (IPTp-SP)
	Intermittent preventive treatment – in infancy (IPTi)	Administration of a full treatment course of sulfadoxine-pyrimethamine (IPTi-SP) delivered through the Expanded Programme on Immunization (EPI) at defined intervals corresponding to routine vaccination schedules
	Seasonal malaria chemoprophylaxis (SMC)	Intermittent administration of a full treatment course of an antimalarial medicine during the malaria season
	IEC/BCC	Advocacy, communication and social mobilization activities related to specific prevention interventions

Annex 2: Highly Synergistic RMNCH Integrated Service Packages

These interventions should be discussed during the country dialogue and included in the concept note, where appropriate. Applicants should also explore government and other partner co-financing in these areas.

Highly synergistic RMNCH integrated service packages	Relevant modules
HIV/AIDS	
Screening and treatment of syphilis in pregnancy	HIV: PMTCT/Prong 1
Family planning	HIV: PMTCT/Prong 1
Diagnosis and treatment of STIs	HIV: Prevention (general population, men who have sex with men and transgender individuals, sex workers and their clients, adolescents and youth)
Malaria	
Integrated community case management (iCCM) for non-malaria components	Malaria: case management HSS: Service delivery
Prevent, measure and treat maternal anemia	HIV: PMTCT Malaria: IPTp HSS: Service delivery
Cross-cutting	
Integrated management of childhood illness (IMCI) at primary-level health facilities	HIV: PMTCT and treatment, care and support TB: Key affected populations and collaborative activities with other programs and sectors Malaria: Case management and facility-based treatment HSS: Procurement and supply chain management

Highly synergistic RMNCH integrated service packages	Relevant modules
Promotion and support for breastfeeding	HIV: PMTCT HSS: Service delivery
Vitamin A supplementation from 6 months of age in Vitamin A deficient populations	HIV: Prevention (other vulnerable populations) TB: Collaborative activities with other programs and sectors HSS: Service delivery
Management of severe acute malnutrition	HIV: Prevention (other vulnerable populations) TB: Collaborative activities with other programs and sectors HSS: Service delivery
Nutrition (including iron, folic acid, deworming pills)	HIV: PMTCT HSS: Service delivery

Annex 3: Additional Resources for RMNCH

For a complete list of technical resources, please refer to the **WHO Technical Guidance Note: Strengthening the inclusion of reproductive, maternal, newborn and child health (RMNCH) in concept notes to the Global Fund.**

(TBD)

Countdown to 2015 – Maternal, Newborn and Child Survival: *Publications*

<http://www.countdown2015mnch.org/reports-and-articles/publications>

Every Woman Every Child: *Resources*

<http://www.everywomaneverychild.org/resources>

Every Newborn: *Toolkit*

<http://www.everynewborn.org/every-newborn-toolkit/>

The Global Fund: *Strategic Investment Guidance & Information Notes*

<http://www.theglobalfund.org/en/fundingmodel/support/infonotes/>

Maternal Health Task Force: *Topics*

<http://www.mhtf.org/topics/>

Partnership for Maternal, Newborn & Child Health (PMNCH): *Knowledge Centre*

<http://www.who.int/pmnch/knowledge/en/>

PMNCH: *RMNCH Policy Compendium*

<http://www.who.int/pmnch/media/news/2014/compendium/en/>

PMNCH: *Packages of Interventions for Family Planning, Safe Abortion care, Maternal, Newborn and Child Health*

http://whqlibdoc.who.int/hq/2010/who_fch_10.06_eng.pdf

RMNCH Strategy and Coordination Team: *Toward a Common RMNCH Country Engagement Process*

<https://lifesavingcommodities.org/?fy1kcwjw>

RMNCH Strategy and Coordination Team: *Toward a Common Approach: Coordinating Reproductive, Maternal, Newborn and Child Health-Related Initiatives*

<https://lifesavingcommodities.org/?m6b254sv>

Roll Back Malaria (RBM) Partnership, Harmonization Working Group: *Malaria Implementation Guidance in Support of the Preparation of Concept Notes for the Global Fund*

http://www.rollbackmalaria.org/partnership/wg/wg_harmonization/docs/HWG-2014-country-briefing-note.pdf

United Nations Children's Fund (UNICEF): *Innovative Approaches to Maternal and Newborn Health: Compendium of Case Studies*

http://www.unicef.org/health/files/Innovative_Approaches_MNH_CaseStudies-2013.pdf

World Bank: *Results-Based Financing for Health*

<https://www.rbfhealth.org/>

World Bank: *How Governments and Development Partners Work Together to Scale Up Successful Results-Based Financing Programs*

<https://www.rbfhealth.org/news/item/946/how-governments-and-development-partners-work-together-scale-successful-results-based->

World Health Organization: *Health Topics – Child Health*

http://www.who.int/topics/child_health/en/

World Health Organization: *Sexual and Reproductive Health*

<http://www.who.int/reproductivehealth/en/>