In the Name of God, the Compassionate, the Merciful

Message from

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to the
REGIONAL WORKSHOP ON THE IMPLEMENTATION OF
BEST PRACTICES IN FAMILY PLANNING

Amman, Jordan, 27–30 September 2009

Your Excellency, Dear Colleagues, Ladies and Gentlemen,

I have great pleasure in welcoming you to this regional workshop on the implementation of best practices in family planning, starting today in the lively city of Amman.

At the outset, I would like to express my sincere gratitude to His Excellency Dr Nayef Al Fayez, Minister of Health, and the Government of Jordan for kindly hosting this workshop and providing us with yet another opportunity to come together and learn from the experiences of each other. I would also like to extend my warm welcome to the participants and representatives of sister United Nations agencies and international organizations joining us in this endeavour. Special thanks go to our colleagues from WHO headquarters for their valuable support and contribution in bringing about this important activity.

Indeed, this workshop is a very special and important activity as it includes a wealth of scientists and experts interested in developing a systematic approach that supports the introduction and use of evidence-based technical guidance for implementing best practices in family planning, and they all have distinguished experience in this field. The occasion also brings together representatives of seven partner agencies concerned with improving the
performance of reproductive health service delivery, along with national family planning managers from countries of the Eastern Mediterranean Region.

I view this workshop with special interest as it highlights a priority issue in reproductive health, focusing specifically on scaling up the implementation of best practices in family planning for promoting maternal and newborn health. It is an excellent opportunity for full interaction with open and free discussions and exchange of information, experience and advice concerning the quality of the existing family planning services, which will enrich our knowledge and enable us to better meet family planning needs of the Region.

Ladies and Gentlemen,

Improving maternal, neonatal and child health has been endorsed as a key development target by Member States, through resolutions EM/RC51/R.4 on maternal and child health, and EM/RC54/R.2 on neonatal mortality. An estimated 58,300 mothers and 1.1 million children under 5 years of age, 510,000 in the first 4 weeks of life, die every year as a result of pregnancy and childbirth complications and common childhood illnesses. Only an 18% reduction in maternal and child mortality has been achieved in the Region since 1990. This problem occurs in a context where several countries in the Region suffer from lack of national policies, political instability, inadequate financial and human resources, restrictive regulations, poor socioeconomic conditions and gender-based discrimination, reduced access and utilization of safe motherhood services, including family planning, and scarcity of health-related data and information necessary to monitor and evaluate maternal health needs and the health services provided.

The health hazards resulting from too early, too late, too close and too many pregnancies are well established. If such high-risk pregnancies were prevented, it is estimated that maternal mortality could be reduced by 25% to 50% in the EM countries. Unfortunately, only 37% of married women are using family planning methods in the Region as a whole. This proportion is much lower in countries with high maternal and newborn mortality levels. Promoting family planning among married women is an effective intervention to prevent many avoidable deaths among children and mothers. Experience has shown that meeting people’s reproductive health
needs requires family planning services that are integrated into a wider framework of reproductive health, which addresses overall health and well-being. Family planning programmes save lives in several ways. First, by allowing mothers to space births at least two years apart, they can dramatically reduce the risk of their morbidity and mortality and increase a child’s chance for survival. Second, by reducing the number of unintended pregnancies, they can help keep women from turning to unsafe abortions. An estimated 40 million or more unwanted pregnancies end in abortion each year, according to WHO, and some 70 000 women die each year as a result of unsafe abortion, almost all in developing countries.

Ladies and Gentlemen,

Since mid 1999, WHO has been working in collaboration with ten partner agencies to develop a systematic approach that supports the introduction and use of evidence-based technical guidance documents in countries. A systematic literature review undertaken by the Cochrane Effective Practice and Organization Group and an evaluation of the use of technical guidance documents disseminated by WHO concluded that the passive distribution of information seldom changes practice. The information may not reach the intended audience, and if received, it may not necessarily be read and often it is unsuited to local policies, practices and cultural norms. A consultation with partner agencies to discuss this issue recommended that the introduction of evidence-based technical guidance documents must be strategically and systematically supported so as to identify interventions that effectively address the structural, technical, performance and interpersonal barriers that constrain the introduction of evidence-based best practices. In response to this recommendation, WHO worked with partner agencies to analyse lessons learned from country-based strategies that have actively supported the introduction and use of technical guidance documents and quality improvement initiatives. The outcome of this work led to the development of a systematic approach to support the dissemination, adaptation and utilization of technical guidance documents, known as the DAU Process, which is now called “Implementing Best Practices.”

This workshop aims to provide an opportunity to orient national programme managers to the concepts and principles of implementing best practices in family planning programmes based on WHO guidelines and recommendations and hence determine action-oriented, feasible steps
required to be undertaken in Member States with limited family planning practices and identify the required technical support.

Dear colleagues,

I would like to stress the need for consolidated efforts to work together with the national, as well as the concerned UN agencies and international and nongovernmental organizations, in order to make appropriate, accessible quality family planning services a reality for all families in the Region. I am confident that this workshop will achieve its objectives with admirable success and provide future direction to our activities in the crucial area of reproductive health care.

I wish you all the best in your efforts and a successful outcome to this activity.