COMPONENTS OF REPRODUCTIVE HEALTH

Reproductive Health needs of Vulnerable Groups/Populations Safe Motherhood Pre-conception care Antenatal Care (ANC) SRH needs of Safe delivery with SBA - Migrant populations - Essential Obstetric Care (EOC) - Unemployed youths Postnatal Care (PNC) - Refugees Perinatal & Neonatal Care - Disabled people Breastfeeding - Disadvantaged socioeconomic groups Immunisation - Mentally impaired Management of Screening for early detection - Congenital abnormalities structural anomalies of cancers of Rights-based FP Information with RH implications from birth - Cervix and Services - Breast ductive - Balanced Counseling - Prostate • HPV Immunization against cancer Strategy/Redi of the cervix - Post-Partum FP (PPFP) Management of other reproductive - Availabilty of full range of organ conditions FP methods Provision for men, women, • Female Genital Mutilation (FGM) girl and boy child's RH needs Early child marriage Eliminat Traditio • Domestic and sexual violence Male involvement and Widowhood rites and RH rights participation on RH issues • Inheritance and Reproductive Status of women's reproductive rights Health rights Girl child education Promotion of healthy sexual Adoption of positive lifestyles maturation Embracing relevant SBCC to Sexuality education reduce risk of contracting STIs Sexual violence Effective treatment for STIs Pesearch Gender roles Provision of rational diagnosis and treatment by qualified Youth friendly services medical experts · Life Planning Skills Promotion of positive RH care/lifestyles Sexually Transmitted Infections Access to relevant information by General management of HIV Infection parents, girls and boys at appropriate abortion AIDS points during reproductive cycle - Pre-hospital care, Provision of appropriate health - Prevention of abortion information and support for Conservative treatment with bed climacteric, menopause rest for the threatened abortion and andropause Medical management of abortion Health Promotion Fundamental Sexual including therapeutic abortion Treatment of septic abortion Management of post abortion care - Counselling - FP information and services

BARE FACTS ON REPRODUCTIVE HEALTH

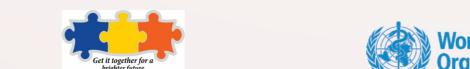
Prevention & Management of Abortion and its complications

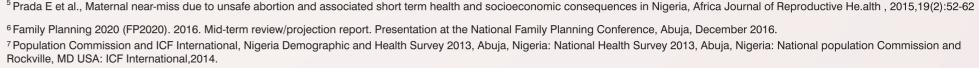
- Globally, the picture of causes of Maternal Mortality is changing albeit slightly and same has been reported in Nigeria. Comparing data from 1990 -2013 with regards to direct causes of maternal mortality, slight decrease in the proportion of deaths attributable to obstructed labour, 9% to 8%, sepsis 10% to 9% and haemorrhage 22% to 18% were observed in Nigeria but increase in the proportion attributable to hypertensive disorder 11% to 12%, HIV/AIDS 0% to 2%, and complications of abortion 15% to 18%
- With the MDGs (1990- 2015) maternal mortality rates (MMR) worldwide dropped by about 44% as against the target of reducing MMR by 75%, from 1000/100,000 in 1990 to 250/100,000 live births by 2015, the estimates from the United Nations indicated that Nigeria recorded a reduction of 37.9% in her MMR between 1990 and 2015 (Uncertainty interval: -5 to 56.3%).2
- On the average, 56 million induced (safe and unsafe) abortions occur worldwide each year with about 1.2 million taking place in Nigeria.4 Incidences of induced abortion were more prevalent in the South-South (17%), closely followed by the North East (16%) and lowest in the South West (11%) as reported by Prada and his colleagues.5
- Contraceptive prevalence rate of married women is 15% for all methods and 10% for modern methods, an increase of 2% since 2003 NDHS. According to the Family Planning 2020 (FP2020) mid-term review/projection report, the mCPR was 13% in 2016, while the proportion of all women using a modern method of family planning was 14.7%.6
- Currently unmet need for FP services among married women is 16% (12% for spacing and 4% for limiting). If all FP needs of married women were met in Nigeria, Contraceptive prevalence rate will be 31%, close to our desired national CPR of 36% in the FP Blue print. The unmet need for unmarried women is higher, 22% as compared with 16% for married women.⁷
- Family planning / contraception prevents unintended pregnancies, reduces the need for abortion, especially unsafe abortion, prevents deaths of mothers and children while some of the methods, such as condoms, help prevent the transmission of HIV and other sexually transmitted infections.

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3 National Agency for the Control of AIDS (NACA). 2016. End-of-term evaluation of National Strategic Plan 2010-2015. Abuja, NACA ⁴ Bankole A, Adewole IF, Hussain R, Awolude O, Singh S, Akinyemi JO. 2015. The Incidence of Abortion in Nigeria. International Perspectives on Sexual and Reproductive Health 41 (4): 170-181.





Federal Ministry of Health





