# Transforming reproductive health in Suriname



**UN Trust Fund for Human Security** 



### **Fast Facts**

Country: Suriname

Duration: June 2002 to May 2005

Implementing UN Agencies: PAHO; WHO

Other Implementing Partners: Stitchting Lobi; local NGOs

Budget: \$314,396.17

Key Words: Access to health care; youth; HIV/AIDS; capacity building

## **BACKGROUND**

In 2002, Suriname faced a range of social and economic issues that seriously threatened the health status of the country's population of 450,000 people. Poverty was concentrated in rural inland areas where access to health-care services was limited. Although the Government of Suriname confirmed its commitment to improve health outcomes and reduce poverty in the

country, there were essentially no resources available to support reproductive health (RH) services or family planning in national health programmes. Consequently, many groups, in particular marginalized youth, faced significant challenges related to sexual and reproductive health, including exposure to HIV/AIDS, unwanted pregnancies and unsafe abortions.

#### PROGRAMME OVERVIEW

#### **GOALS AND OBJECTIVES**

The project aimed to (i) expand youth friendly RH services; (ii) support education to address gender inequalities and increase HIV/AIDS awareness; (iii) promote a change in sexual and RH practices among young people of

reproductive age; and (iv) engage with local partners and key health institutions in capacity building trainings in order to apply sustainable RH care.

#### **BENEFICIARIES**

The project targeted Suriname's entire population but benefited particularly those between the ages of 15 to 24. As a result, the participating communities benefited from mobile reproductive health clinics, awareness raising education on HIV/AIDS, counselling on RH and family planning, as well as provision of contraceptives.

Relevant stakeholders, including Government institutions, local NGOs, health service providers and community groups, participated in capacity building trainings. Furthermore, beneficiaries were referred to STI treatment, HIV care and support services, as needed.