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**STATEMENT BY MRS S. PARANJOTHY  
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PARENTHOOD FEDERATION**

Mr Chairman,  
Distinguished Representatives and Colleagues,  
Ladies and Gentlemen,

On behalf of the International Planned Parenthood Federation (IPPF), I would like to take this opportunity to thank the organizers of the WHO 45th session of the Regional Committee for the Western Pacific for having invited the Federation to attend this august meeting and for having given us this opportunity to present this statement.

As you are probably aware, IPPF was admitted into official relations with WHO as far back as 1966. An IPPF/WHO Memorandum of Understanding which was drawn up in 1976, forms the basis of collaboration with IPPF, which extends to both regional and country levels. IPPF has been, and will continue to be, a positive partner in the promotion of primary health care as a whole, as well as in several specific areas such as family planning, contraceptive technology, child growth and development, health and development of adolescents and women. IPPF is also a permanent member of the WHO's Human Reproduction Programmes' Policy Coordinating Committee. Staff of IPPF are on the WHO Scientific and Technical Advisory Group (STAG) for the Adolescent Reproductive Health Programmes. The President of IPPF is (in his individual capacity), a member of WHO's STAG for the Human Reproductive Programme, while the director of the WHO's Human Reproductive Programme is a member of IPPF's International Medical Advisory Panel. This Panel sets standards on medical aspects of family planning programmes.

There is also close collaboration in the preparation of contraceptive guidelines including guidelines for barrier contraception, vasectomy and female sterilization.

IPPF being a member of the Task Force on Adolescent Reproductive Health, has also assisted in activities related to maternal and child health care including infant feeding and breast-milk substitutes, and participated in activities related to adolescent health. IPPF has also assisted in funding certain joint activities and has taken part in technical meetings of the WHO Regional Offices.

IPPF is a member of the Interagency Steering Committee for follow up to Safe Motherhood Initiatives, and has co-sponsored with WHO, international meetings in the field of Safe-Motherhood. These meetings have been both global and regional.

IPPF has also worked closely with WHO's special programme on AIDS from its inception in 1987 and more recently we have continued to work with WHO's global programme on AIDS by attending the GPAs meeting of participating parties for the prevention and control of AIDS and special consultations convened by them. These meetings take place regularly in Geneva. We also participate in meetings of national AIDS committees which are organized at the country level in collaboration with GPA.

IPPF's collaboration with WHO follows the main provisions with respect to Maternal and Child Health and Family Planning, as well as Human Reproductive Research. The Vision 2000 of IPPF which was adopted at the 1992 Members' Assembly is a blueprint for the new decade, in which six Challenges have been identified as a matter of priority: meeting the unmet need for family planning, issues of sexual and reproductive health, unsafe abortion, empowerment of women, youth and quality of care. As you can see, it has in fact, the WHO's objectives of Quality of Care, Unsafe Abortion and Sexual Health. IPPF's Vision 2000 has now been translated into the four official languages of IPPF and has been widely distributed both within and outside the Federation. However, there is still a significant amount of work to be done in familiarizing FPAs with this document, as well as providing guidance on its implementation. As Vision 2000 is a long term plan, monitoring its implementation will take several years and the final evaluation of the plan will not take place until sometime later, towards the end of the Century.

Perhaps it will be useful to focus on one of the challenges outlined in Vision 2000 for this Statement, and what this Region, the East, and South East Asia and Oceania Region (ESEAOR) is doing about it. The Challenge is Quality of Care. Quality of Care has been given prominence over the past two years in the FPA programmes. It has been recognized that Service Providers have a responsibility to ensure clients are aware of their rights, but also have their own needs. The importance of training providers, to ensure their knowledge is up to date, and also to give them necessary skills in sensitivity and counselling, has been recognized and the Region has developed Quality Assurance Manuals, viz

- i. **Essential Clinical Standards for Contraceptive Service Delivery for FPAs in East and South East Region, and**
- ii. **Essential Clinical Standards for Contraceptive Service Delivery in the Pacific Islands FPAs**

The FPAs have translated the manuals into their local languages and have been trained on the use of the Manuals.

We have also developed a Module to monitor Quality Assurance in the FPAs, and it is hoped that with this Module high standards of Quality Assurance will be maintained.

We would like to study and adapt the initiatives taken by WHO for this Region on Quality Assurance and can see room for collaboration in this effort.

With the long history of very close relations with WHO, we hope that we can continue to build on this strong collaboration and count on WHO's support both regionally and nationally.

Once again we would like to express our deepest appreciation for the invitation to attend this meeting.

Thank you, Mr Chairman.