

# BLUE VENTURES COMMITMENT SELF-REPORTING QUESTIONNAIRE 2020



*EWEC Secretariat, PMNCH, FP2020 self-reporting questionnaire to assess progress on implementation of commitments to the Global Strategy on Women's, Children's and Adolescents' Health.*

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## COMMITMENT PROGRESS SUMMARY NARRATIVE

Since making our commitment in June 2017, Blue Ventures, a marine conservation organization, has contributed to improving access to family planning for a population of 383,000 living in Madagascar, Mozambique and Kenya. This has been achieved through direct implementation of services, and through the facilitation of health-environment partnerships, working alongside the Madagascar PHE Network. These partnerships between health and conservation organizations serve to increase access to family planning services for remote communities living in areas of high biodiversity.

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## THEMATIC COMMITMENT PROGRESS

### *Reduce global maternal mortality to less than 70 deaths per 100,000 births*

Proportion of births attended by skilled health personnel,  
Proportion of women aged 15-49 who received 4 or more antenatal care visits

### *Geographic Coverage. Check all the geographical levels that you implement your commitment-related activities in?*

Regional, Country

### *Linkage to National Health Strategies. Are commitment-related objectives and/or targets aligned with the national health strategy of the country or countries in which activities take place in?*

Yes

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## EVERY WOMAN EVERY CHILD FOCUS AREAS

### *Adolescent and Young Adult Health and Wellbeing*

Applicable  
Current Status: Ongoing

#### Activities Implemented:

Youth groups developed, supported to address key health issues facing young people (with particular focus on sexual and reproductive health).

Community Engagement: Yes

Health System Resilience: Yes  
Individual Potential: Yes  
Multisectoral Action: Yes

### ***Sexual and Reproductive Health and Rights***

Current Status: Ongoing

Activities Implemented:

Improved access to sexual and reproductive health services, through training of additional community health workers (CHWs) or through strengthening support for existing CHWs and other service delivery points. A total of 625 service delivery points strengthened. This has been complemented by community health education to support the adoption of healthier behaviors and linking human and environmental wellbeing.

Community Engagement: Yes  
Health System Resilience: Yes  
Financing for Health: Yes  
Multisectoral Action: Yes  
Service Delivery Included: Yes

### ***Empowerment of Women, Girls, and communities***

Current Status: Ongoing

Specific gender responsive initiatives that Blue Ventures has started include involving women in fisheries monitoring, proactively working to increase women's representation in management structures through holding open elections, engaging men in discussions about gender roles and organizing separate women's groups for fisheries management.

Multisectoral Action: Yes  
Community Engagement: Yes

***Please explain the reasons for your answer and if and how COVID-19 influenced the projected change (or no change) in financial commitments. If possible, describe the estimated impact the projected change (or no change) might have on women, children and adolescents (maximum 200 words)***

As of yet we do not know if COVID-19 will negatively impact our ability to fundraise and therefore support delivery of family planning services.

***Please explain the reasons for your answer and if and how COVID-19 influenced the projected change (or no change) in non-financial commitments. If possible, describe the estimated impact the projected change (or no change) might have on women, children and adolescents (maximum 200 words)***

We continue to see family planning as a vital and essential service. However, COVID-19 is limiting our ability to engage with partners on improving access to health services, and limiting partners' ability to provide these services to communities. Our efforts to improve access to family planning for the communities we work with will continue, however we anticipate reaching fewer people than originally projected as a result.

***Describe the factors that contributed to commitment-related activities being delayed or to an unsuccessful implementation. If delayed, what was needed or is needed, if the problem is current, to restart the activities impacted?***

Difficulty in finding willing partners wishing to engage in health-environment partnerships outside of Madagascar.

***Success Factors. What factors contributed most to the successful completion of your commitment? In your response, describe successful factors as it relates to completing your commitment's original or updated objectives/targets.***

In Madagascar we had a strong proof of concept in the form of a highly successful PHE program and a large number of partners willing to engage in health environment partnerships.

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