CECI's Approach

Sexual and Reproductive Health and Rights

Towards resilient healthcare systems centered on the rights of women and adolescent girls.

CECI works to transform healthcare systems so that they provide high-quality, accessible services tailored to the needs of women and adolescent girls. The core of our approach is about straightening women's bodily autonomy and decision-making power. Women's leadership, social innovation, and strong partnerships concretely enhance access, quality of care, and ensure services are aligned with the needs and realities of women and communities

Our work is based on four simple and concrete principles of change:

Women-centered services build trust and increase utilization.

Adapting health services (infrastructure, trained staff, technological tools, and welcoming environments) improves the quality and accessibility of care, encouraging more women and adolescent girls to use them regularly.

Access to reliable and culturally appropriate information strengthens decision-making autonomy.

By disseminating accessible and contextualized knowledge through digital platforms, community networks, peers, and traditional practitioners, women and adolescent girls are better equipped to make informed decisions about their health and exercise their bodily autonomy.

Social norms evolve through collective engagement.

By engaging youth, men, and both community and national leaders in the promotion of women health rights, sociocultural barriers that limit women's mobility and freedom of choice are reduced.

The leadership of women and adolescent girls is a lever for sustainable transformation.

When women actively participate in health governance, they influence the quality and relevance of services while strengthening the accountability of health institutions.

The CECI model: Right to bodily autonomy

CECI and its partners operate at the interface between healthcare systems, communities, and innovations to realign priorities, practices, and institutional capacities around sexual and reproductive health rights, creating sustainable, equitable care pathways led by women themselves.

Sustainability and innovations

Of the seven best practices included in the 2025 reference manual of Mali's National Office of Reproductive Health, four are derived from innovations led by CECI and its partners:

- **Maternity waiting homes**
- **Community health solidarity funds**
- **WHC – Women-led Health Committees**
- **Health Stakeholder Coordination Committees**

Initially developed in Haiti (2016–2022), the WHCs were subsequently adopted by other health institutions, demonstrating their transferability, sustainability, and scalability, even in high-security constraint environments.

Strengthening demand for and access to health services

Socio-economic barriers

Deploying transportation solutions (motorcycle ambulances and village health solidarity funds) and community health savings mechanisms to secure access to essential care.

Trust and information

CECI combines community tools and digital platforms to disseminate reliable, contextualized information on health rights and services, particularly for young people.

Power and agency

Working to transform practices that limit the autonomy and freedom of movement of women and adolescent girls in accessing services, while also engaging men, youth, and community leaders.

GBV Nexus

Safe reporting, referral, and care mechanisms are integrated at the core of health services and community networks.

The maternal mortality ratio decreased from 303 to 214 deaths per 100,000 live births between 2020 and 2023 in the Kayes region of Mali, where CECI and its partners have worked for over 10 years.

CECI builds bridges

Systems and communities in synergy

By connecting providers, healthcare and protection services, and community actors, this approach helps structure secure and continuous care pathways.

Local governance and service accountability

Through Women-led Health Committees, CECI directly involves women in managing the healthcare system and improving services provided to women and the general population.

Third-party innovation spaces

Hybrid spaces—from maternity waiting homes to confidential mobile apps—provide access to reliable information in local languages and support care models that combine medical expertise, inclusive design, and technological innovation.

Between 2016 and 2021, in Haiti's Nord department, following an initiative by CECI and its partners, assisted births rose from 26% to 43%, and hospital maternal mortality fell from 500 to 332 deaths per 100,000 live births (ACOSME Final Report, 2021).

Improving the quality of health services by and for women

Clinical competencies and convergence of practices

Our approach strengthens the quality and safety of care by training providers in SRHR and GBV, while bridging the gap between traditional/Indigenous knowledge and biomedical practices.

Infrastructures and technologies centered on women and adolescent girls

The modernization of healthcare facilities is supported to ensure confidentiality, safety, and access to medical expertise, while deploying innovations such as tele-ultrasound, especially in underserved areas.

Continuity and proximity of care

Reducing gaps in care and strengthening seamless, coordinated care pathways are supported by the activation of mobile services and more agile, effective referral systems.

In 2023, the proportion of women and adolescent girls who gave birth in a health center after completing the 4 recommended prenatal consultations reached 51%, compared to 35% at the start of the project.*

*Data sourced from the Yellen Project External Final Evaluation, 2025

Our Partners

CECI mobilizes strategic partnerships to improve the use and quality of health services and to advance women's rights, particularly in sexual and reproductive health. Our model is based on structured collaboration between public institutions, civil society, communities, and women themselves.

Our partners include:

Academic and medical institutions strengthen clinical competencies through continuous training in SRHR and GBV, integrating approaches sensitive to gender, the effects of climate change, and fragile contexts.

Women's organizations promote the transformation of social norms, conduct community outreach, and improve referrals to healthcare services.

Midwives' and traditional practitioners' networks ensure community-based and culturally appropriate anchoring, as well as an improvement in the quality of primary care, especially in underserved areas.

Local and national authorities facilitate the alignment of innovations with public policies and support their scaling up.

The private sector supports the introduction of technological innovations to expand access and strengthen the quality of care.

CECI is an international organization active in 17 countries in Asia, Africa, and the Americas. CECI works in two impact areas: Inclusive and Sustainable Economies for Women and Youth, and Rights of Women and Girls. Inclusive Governance and Humanitarian Action forms the foundation of our work, enabling the achievement of results across both impact areas.

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