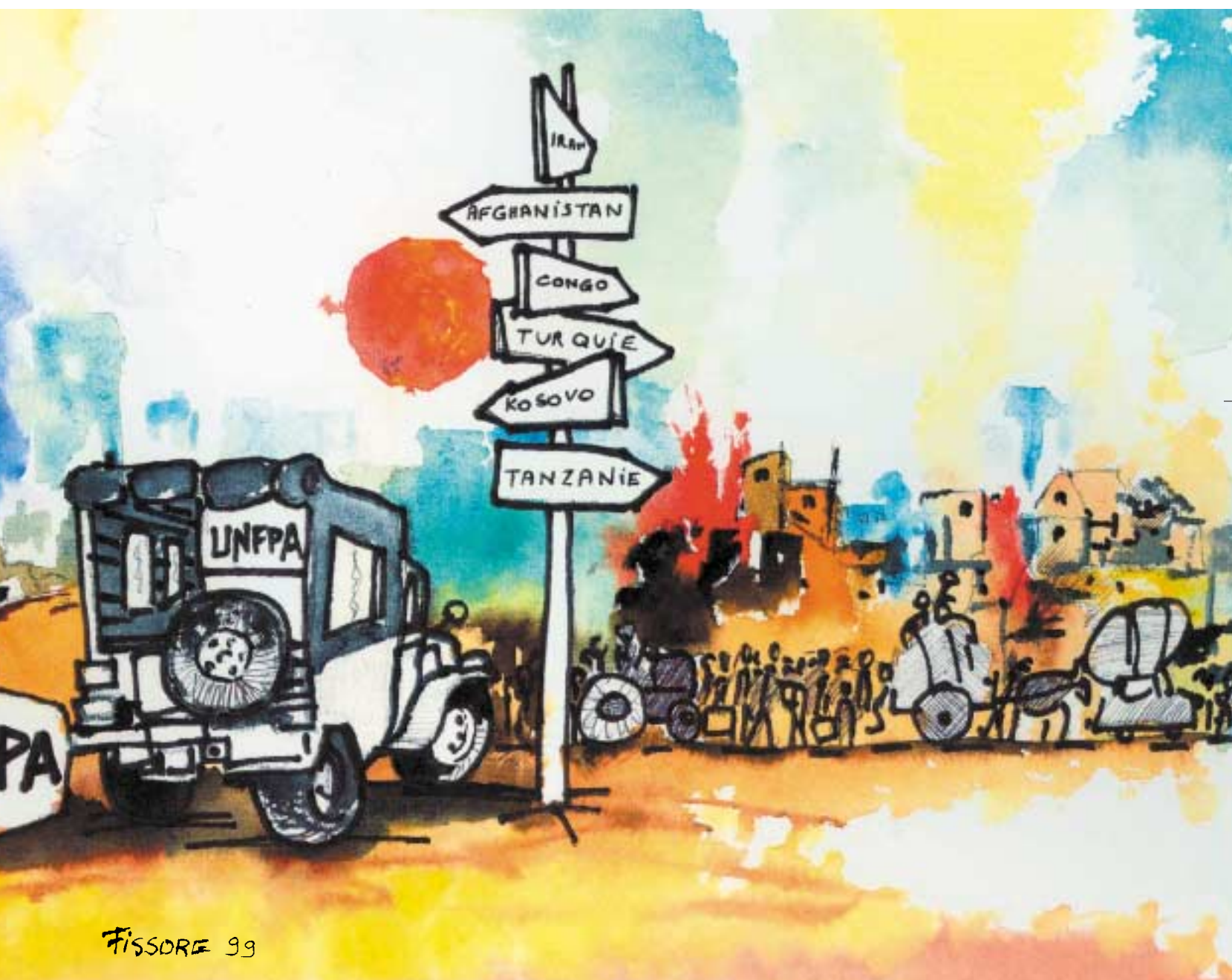


Reproductive Health for Communities in Crisis

UNFPA EMERGENCY RESPONSE



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United Nations
Population Fund



Preface

The impact of an earthquake, flood or war on reproductive health can be devastating. Communities in crisis are suddenly deprived of reproductive health information and services. Access is cut off, yet needs persist, even escalate. A large number of refugees and internally displaced women will be pregnant, facing delivery under dangerous conditions; others may be victims of violence including rape.

The United Nations Population Fund (UNFPA) is committed to assisting and protecting women, men and youth made vulnerable by natural disaster, armed conflict, persecution and other causes. This is a commitment to refugees forced to flee their home country, to the internally displaced uprooted within national boundaries, and to all those affected when a community is in crisis. UNFPA works with a network of partners to provide support for reproductive health for those in need no matter what their situations.

Rapid response to emergencies includes the immediate shipment of supplies and equipment to help meet the minimum requirements in a crisis, such as enabling pregnant women to deliver in a clean environment. When the situation stabilizes, UNFPA provides support for the full range of reproductive health services. These services address the life-and-death complications of pregnancy and delivery, the transmission of sexually transmitted infections including HIV/AIDS, adolescent health, violence against women, and access to condoms and other contraceptives.

Global advocacy efforts and strong partnerships are the foundation of the UNFPA response. Advocacy emphasizes the importance of providing reproductive health information and services from the very beginning of a crisis. The Fund works closely with partners in governments, UN agencies and non-governmental organizations (NGOs) to see that reproductive health is an integrated part of primary health services. Through these partnerships, advanced planning and established mechanisms for cooperation are contributing to a faster and more coordinated humanitarian response. In the long term, the goal is to link relief operations with ongoing development activities.

UNFPA formalized and greatly increased its ability to respond rapidly and appropriately to crisis situations in 1994. After seven years of work in this area, the Fund has made significant strides in raising awareness about reproductive health needs in emergencies, in working with partners to develop technical standards in the area, and in improving the capacities of UNFPA country offices around the world to respond in emergencies.

As this publication goes to print, UNFPA is responding to the crisis in Afghanistan by launching its largest-ever humanitarian operation.

A handwritten signature in orange ink, reading "Thoraya A. Obaid".

Thoraya A. Obaid
UNFPA Executive Director

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List of Acronyms

HRG UNFPA Humanitarian Response Group

IAWG Inter-Agency Working Group for Reproductive Health in Refugee Situations

ICPD International Conference on Population and Development

IDP Internally displaced person

IFRC International Federation of Red Cross and Red Crescent Societies

NGO Non-governmental organization

STI Sexually transmitted infection

UNAIDS Joint United Nations Programme on HIV/AIDS

UNFPA United Nations Population Fund

UNHCR Office of the United Nations High Commissioner for Refugees

WHO World Health Organization

The United Nations Population Fund (UNFPA) is the world's largest international source of population assistance. UNFPA helps developing countries and countries with economies in transition, at their request, to improve reproductive health and family planning services and to formulate population policies and strategies in support of sustainable development. About a quarter of all population assistance from donor nations to developing countries is channelled through UNFPA. Since it began operations in 1969, the Fund has provided some \$5 billion in assistance.

I

Early Action in Extreme Situations

“UNFPA recognizes that all refugees and persons in emergency situations have the same vital human rights, including the right to reproductive health, as people in any community.”

— Thoraya A. Obaid, UNFPA Executive Director

“Pledged to implement the ICPD Programme of Action, UNFPA has expanded its assistance beyond settled communities to those torn apart by crisis.”

— UNFPA Executive Board

Rapid response for reproductive health

Too often neglected in the rush to provide relief, reproductive health information and services are required from the start. In an earthquake, flood or violent conflict, the immediate concerns are the same: childbirth, sexually transmitted infections (STIs) and sexual violence.

UNFPA supports early and effective action and cooperates with governments, other UN agencies and non-governmental organizations

(NGOs) to meet the emergency reproductive health needs of refugees, the internally displaced and others affected by a crisis.

- Since 1994, UNFPA has supported emergency reproductive health projects in more than 50 countries and territories;
- In 2000, UNFPA dispatched 35 shipments of emergency reproductive health equipment and supplies to 20 countries and territories—the largest number to date;
- A rapid-response fund enables UNFPA to mount a quick response to emergencies,



"Some basic supplies can make a big difference in childbirth: a bar of soap, a plastic sheet, a razor blade and string. Add to that condoms, medicine, surgical equipment and trained personnel and you have the start of real reproductive health services under crisis conditions."

— UNFPA emergencies consultant

especially in the initial stages, and staff in country offices around the world are on the spot when disaster strikes.

UNFPA provides funding, technical assistance and direct support including:

- Emergency reproductive health supplies and equipment;
- Rapid assessments, research and data analysis;
- Training and capacity-building;
- Advocacy and awareness-raising;
- Inter-agency coordination and programme planning.

Partnership is a priority for UNFPA, which endeavours to leverage limited resources to establish the services that vulnerable populations want and need. For a culturally sensitive response, UNFPA invites the participation of the women, men and young people most directly affected.

Heightened risk, greater need

Pregnancy and childbirth in developing countries are always dangerous: one woman dies

every minute from pregnancy-related causes. When disaster strikes, precarious conditions multiply risk. Sexual violence, HIV/AIDS and the absence of family planning make a bad situation much worse.

- Women and children account for more than 75 per cent of the refugees and displaced persons at risk from war, famine, persecution and natural disaster;
- 25 per cent of this population at risk are women of reproductive age and one in five is likely to be pregnant;
- Internally displaced persons numbered over 50 million as of 2001, of whom 20 to 25 million have been displaced by wars and instability;¹
- Vulnerability to natural disasters is increasing, exacerbated by poverty and environmental destruction. The number and scope of disasters increased during the decade of the nineties by 10 per cent, and at least 90 per cent of victims lived in developing countries.²

Neglecting reproductive health in emergencies has serious consequences: unwanted pregnancies, preventable maternal and infant deaths, and the spread of STIs including HIV/AIDS.

¹ UN Office for the Coordination of Humanitarian Affairs, 11 July 2001.

² Ibid.

UNFPA support focuses on:

- Safe motherhood through clean delivery, family planning and emergency obstetric care;
- Family planning information and services;
- Prevention and treatment of reproductive tract infections and STIs;
- Prevention of HIV/AIDS, including information on universal precautions;
- Adolescent health;
- Prevention and treatment of sexual and gender-based violence.

Rights apply in emergencies

The right to reproductive health applies to all people at all times.³ Many international instruments recognize reproductive health, including family planning, as a human right.

The International Conference on Population and Development (ICPD) Programme of Action, endorsed by 179 countries in Cairo in 1994, recognized the need to ensure reproductive rights and provide reproductive health care in emergency situations, especially for women and adolescents.

Ensuring access to populations in need

Communities in crisis suffer a loss of access to services, which UNFPA works to restore or to provide in temporary locations. While access is most obviously a problem for refugees and the internally displaced, people in surrounding communities and other family members may also be affected by the crisis. Access continues to be a priority once a crisis concludes, during the process of recovery and rehabilitation.

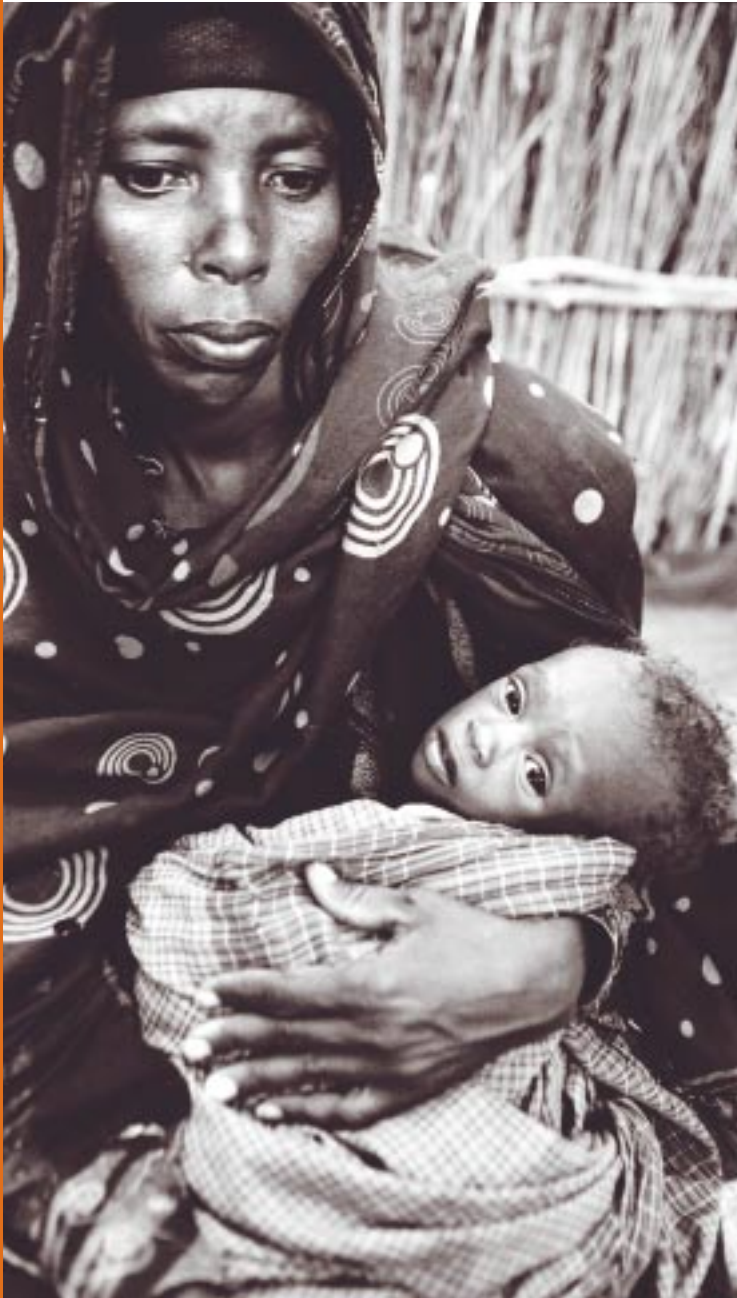
A refugee is defined by the UN Convention Relating to the Status of Refugees as:

“A person who, owing to a well founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group, or political opinion, is outside of the country of his nationality and is unable, or, owing to such fear, is unwilling to avail himself of the protection of that country;...”

Internally displaced persons (IDPs) are defined by the UN Secretary-General as: “Persons who, as a result of armed conflict, internal strife, systematic violations of human rights or natural or man-made disasters have been forced to flee their homes, suddenly or unexpectedly, and in large numbers, and who have not crossed any international borders.”

“Governments are urged to strengthen their support for international protection and assistance activities on behalf of refugees and, as appropriate, displaced persons and to promote the search for

³ ICPD Programme of Action (1994), paragraph 7.2: “Reproductive health is a state of complete physical, mental and social well-being and not merely the absence of disease and infirmity, in all matters related to the reproductive system and to its functions and processes. Reproductive health therefore implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so. Implicit in this last condition are the rights of men and women to be informed and to have access to safe, effective, affordable and acceptable methods of family planning of their choice, as well as other methods of their choice for regulation of fertility which are not against the law, and the right of access to appropriate health care services that will enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant.”



A woman holds her severely malnourished infant in the crowded centre, in the town of Gode, 500 km south of Addis Ababa, Ethiopia.

lasting solutions to their plight. In doing so, Governments are encouraged to enhance regional and international mechanisms that promote appropriate shared responsibility for the protection and assistance needs of refugees. All necessary measures should be taken to ensure the physical protection of refugees—in particular, that of refugee women and refugee children—especially against exploitation, abuse and all forms of violence.”

— ICPD Programme of Action (1994), paragraph 10.24

Five years later, as many countries at a special session of the UN General Assembly agreed:

“Adequate and sufficient international support should be extended to meet the basic needs of refugee populations, including the provision of access to adequate accommodation, education, protection from violence, health services, including reproductive health and family planning, and other basic social services including clean water, sanitation, and nutrition.”

— Key Actions for the Further Implementation of the ICPD (1999), paragraph 29

Effective reproductive health programmes safeguard human rights such as the right to health, to freely decide the number and spacing of children, to information and education, and to freedom from sexual violence and coercion.

Many countries respect these rights and are making family planning and reproductive health information and services more accessible for increasing numbers of women, men and young people. In emergencies, however, reproductive rights are often violated—and

Who needs reproductive health care in a crisis situation?

A pregnant woman: She needs food, water, sanitation, shelter and health care—the focus of immediate life-saving measures taken in response to an emergency. She needs more, however, and has a right to it. Care before, during and after childbirth could save her life and that of her infant. Complications of pregnancy and childbirth are a leading cause of death and disease among refugee women of childbearing age.

A new mother: Far from home, she does not know where to go for help. Malnutrition and infectious diseases threaten her health and her ability to breast-feed her vulnerable infant. Also, she knows she will soon need contraceptives to prevent another pregnancy during this difficult time.

An adolescent girl: Pressures to leave school and marry were already limiting her options. Now

she fears the soldiers who forced her family to flee their village and keep them on the move. Women and girls who are forced from their homes face a heightened risk of sexual violence and exploitation. Large numbers of rapes have been documented in several recent conflicts.

An adolescent boy: He is not yet a man but there has been no one to guide him since the crisis turned his life upside-down. His friends are bored without school or work and do not seem to care about what happens next. In crisis situations, young people face increased risks of STIs, unwanted pregnancy and sexual violence.

An adult man: He has not seen a health care provider since the disaster struck. So many facilities were destroyed and so few services are available. He used to use condoms and would like to continue, especially since infections and diseases are spreading more quickly in the chaos. He also wants to help plan his family and talk to his wife about contraception so he needs information.

