



# Coping with Crises

## How To Meet Reproductive Health Needs in Crisis Situations

- **Urgent reproductive health care needs during crisis situations include safe motherhood, protection from and response to sexual and gender-based violence, prevention and treatment of STIs including HIV/AIDS, access to family planning methods, and adolescent reproductive health.**
- **Local health care service providers can best serve the needs of refugees dispersed within communities.**
- **Materials such as the Inter-Agency Field Manual and Minimum Initial Service Package provide guidelines for local providers.**

### **Crisis situations put reproductive health at great risk.**

As events continue to remind us, both large-scale natural disasters and armed conflict occur often. From January 2004 to September 2005, natural disasters have affected some 200 million people. Today, nearly 40 million people have fled their homes as a result of armed conflict.

People caught in crisis situations have crucial reproductive health needs. The needs of pregnant women are most urgent. Complications of labor and delivery can be life-threatening when women lack adequate care. Risk for HIV/AIDS, other STIs, and unwanted pregnancy increases, particularly when disorder provides cover for rape and other sexual coercion. People may not have access to condoms or other family planning methods and services. If possible, when contraceptive supplies are disrupted, emergency contraception should be made available to any woman who has had unprotected intercourse.

### **What can local health care providers do when crisis strikes?**

Health care providers understand people's needs and have experience meeting them, but few have worked in humanitarian relief. By learning more and being prepared, family planning providers and managers—whether at the community level or internationally—could help in several ways:

- **Plan ahead.** Make emergency preparedness plans that consider staffing, supplies, logistics, infrastructure, establishing relationships with news media, and coordination with other organizations. Expect that normal work will be disrupted, and plan for contingencies. For example, crisis situations present special logistical challenges, often undermining existing logistics systems that were weak to begin with. However, any reproductive health program can design and use a basic logistics management system to help decide what supplies to stock, how much to stock, and when to reorder. (For more information see: <http://www.jsi.com/JSIInternet/Publications/healthlogistics.cfm>) Providers can also respond effectively by creating a skills roster that identifies health care providers and others with family planning and reproductive health skills. Disaster preparedness training can help providers and government officials respond effectively. The International Committee of the Red Cross provides the "Health in Emergencies in Large Populations (H.E.L.P)" course, a three-week module focused on reproductive health in large-scale emergency situations. (For more information see: <http://www.icrc.org/web/eng/siteeng0.nsf/iwpList303/>)
- **Follow guides to crisis care.** The materials that guide international humanitarian relief providers—particularly the Inter-Agency Field Manual and its Minimum Initial Service Package (MISP)—can inform local providers of the reproductive health care needs of refugees and how to meet them. The Inter-Agency Field Manual is a key tool for planning, implementation,



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monitoring, and evaluation. The MISP, developed by the Inter-Agency Working Group on Reproductive Health in Refugee Situations, is a series of activities and supplies designed to: (1) Give health care providers the tools they need to take the crucial first steps in a natural disaster or conflict where many people are displaced; and (2) Minimize mistakes that health care providers might make because they are unfamiliar with crisis situations. The MISP is intended for the acute phase of a crisis and can be implemented immediately without a needs assessment. Kits of supplies that are part of the MISP can be ordered at any time, without waiting for an emergency to occur.

- **Collaborate with international relief agencies** as soon as possible to help provide sustained, integrated emergency care. Approach someone working for a UN organization and ask which organizations and/or individuals are coordinating and implementing reproductive health care or the MISP. Offer your services and give your qualifications. If you represent your hospital or clinic, provide its roster of staff names and qualifications and the health care services it can offer.
- **Coordinate with other relief and health care organizations** for efficiency and speed. One organization or person should serve as the focal point for reproductive health care.
- **Focus on refugees not living in camps.** Refugees dispersed among the host communities need as much help as refugees in camps, and local organizations may be able to serve them better than relief agencies can.
- **Seek help from the survivors.** Some refugees may be health care professionals themselves. Often, they can contribute their skills to care for others.
- **Work toward recovery.** When the international relief workers leave, local health care organizations and providers take back the full responsibility for serving people's needs. With adequate support, strong health care services, with a strong reproductive health care component, can speed the transition from relief to recovery.
- **Join the Inter-Agency Working Group (IAWG).** Any reproductive health organization or humanitarian relief agency can join the IAWG. Through interagency collaboration, the working group seeks to improve reproductive health care for people in crisis situations. The IAWG electronic mailing list offers updates on reproductive health care in current crisis situations. If possible, providers can also join or start a district or local interagency working group that could serve as a focal point for collaborating with relief agencies working with refugees. For further information contact Nadine Cornier at the UN High Commissioner for Refugees (CORNIER@unhcr.ch).

**For more information:** This brief is based on **Population Reports, *Coping with Crises: How Providers Can Meet Reproductive Health Needs in Crisis Situations***. Full text of the report can be seen online at: <http://www.populationreports.org/j53/j53english.pdf>. For printed copies of the report, send an e-mail to [orders@jhuccp.org](mailto:orders@jhuccp.org) or write to: Orders Department, Center for Communication Programs, Johns Hopkins Bloomberg School of Public Health, 111 Market Place, Suite 310, Baltimore, MD 21202, USA. A web-based order form can be found at: <http://www.jhuccp.org/cgi-bin/orders/orderform.cgi>



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