Reproductive Health in Humanitarian Settings Toolkit

An estimated 68.5 million people worldwide were considered forcibly displaced as a result of conflict and persecution by the end of 2018—the highest number on record. Women and girls comprise half of this population.

In natural disasters, conflict-affected settings, and other humanitarian crises, the provision of safe food and drinking water, shelter, and emergency and basic medical care are top priorities, but reproductive health services are often overlooked. People in emergency settings often face sexual and gender-based violence and increased exposure to reproductive health threats. As with other services such as education and housing, the interruption of reproductive health, family planning, HIV, and related services due to a humanitarian emergency can have long-term negative effects.

Providing Reproductive Health Services in Humanitarian Settings

Fortunately, emergency workers, health care providers, and others involved in disaster relief and emergency management now have access to a growing body of tools and guidance for providing reproductive health, family planning, maternal and child health, and other related services, including the prevention and treatment of HIV and other STIs as well as gender-based violence. This Toolkit provides both general service delivery resources and information tailored to the needs of specific populations such as youth and people living with HIV. The Toolkit also offers a collection of resources for incorporating gender considerations into emergency health systems, service delivery practices, the development of shelters, and more. Finally, the Toolkit contains links to key humanitarian organizations with expertise in reproductive health in emergencies and related issues.

Do you have a comment, or would you like to suggest a resource for inclusion in this Toolkit? Please fill out our feedback form.

What are K4Health Toolkits?

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What are K4Health Toolkits?

K4Health Toolkits are electronic collections of carefully selected information resources on a particular topic for health policy makers, program managers and service providers. They are based on a continuous publishing principle that allows them to evolve after publication to capture additional resources and to identify and fill remaining information gaps.

What is the purpose of this Toolkit?

This toolkit shares evidence-based guidance and tools for the provision of reproductive health and related services in humanitarian settings.

Who developed this Toolkit?

The Reproductive Health in Humanitarian Settings Toolkit was developed by K4Health. We welcome collaboration and feedback from interested organizations.

What types of resources are included?

This toolkit is not a comprehensive library of all existing disaster management materials but a strategic package of resources to guide decision makers, donors, program managers, service providers, emergency workers, and others through the processes of planning and implementing reproductive health services in humanitarian settings. These resources include guidelines and tools for addressing:

- Reproductive health service delivery
- Family planning
- Maternal and child health
- HIV and sexually transmitted infections
- The unique needs of young people
- Gender considerations
- Gender-based violence
The Toolkit also contains links to key humanitarian organizations who can provide further expertise, evidence, and tools for reproductive health service delivery in crisis.

/Who are the intended audiences?

- **Donors and policymakers** will find evidence packaged in a variety of formats to help inform decision makers and donors about the need for reproductive health services in humanitarian settings.
- **Program managers** will find information and tools to help them advocate for resources to launch, maintain, improve or expand their reproductive health programs.
- **Health service providers**, including emergency workers, clinicians, and community health workers, can access tools to help them build their capacity for providing reproductive health, family planning, HIV, and other services in humanitarian settings, while addressing the unique needs of particular populations such as youth, women, girls, men, and boys.
- **Communication professionals** can use the toolkit resources to explore strategies, media and messages for addressing reproductive health needs of people living in humanitarian settings.

/How do I get started using this Toolkit?

There are several ways to browse the content of this Toolkit:

- Use the blue navigation menu on the right side of the page to browse sections of the Toolkit by topic.
- Use the Search This Toolkit search bar on the right side of the page below the navigation menu to search for resources by keyword, language, publisher or publication date.
- Use the Toolkit site map.

Within each Toolkit page, lists of resources are ordered according to publication date, and within the same publication year, resources are ordered alphabetically. Click on the title of the resource for more information about it, or click on the full-text link to get direct access to the full publication. Some of the tools are readily available in an adaptable format (for example, Microsoft Word documents and PowerPoint presentations). We encourage you to alter and personalize these tools for your own use. (Please remember to credit the source).

/How can I suggest a resource to include in this Toolkit?

We invite you to contribute to evolving and enhancing this Toolkit. If you have developed or use quality resources that you think should be included in this Toolkit, please email us or fill out our feedback form with your suggestions. K4Health will review and consider your suggestions.

/How can I make a comment or give feedback?

If you have comments about the Toolkit, please share them through the feedback form. Your
feedback will help to ensure the toolkit remains up-to-date and is continually improved. For example, you can share ideas about how you have used the toolkit in your work so that others can learn from and adapt your experiences.

Reproductive Health Service Delivery

Reproductive health issues are a significant cause of morbidity and mortality in disaster- and conflict-affected situations. Disruption of access to reproductive health information, services, and supplies means people who need family planning and lifesaving interventions such as skilled prenatal care and birth attendance will suffer. The result is more unplanned pregnancies, unsafe abortions, and complicated deliveries. In addition, women and girls in humanitarian settings are at increased risk for rape and sexual assault, heightening the need for medical attention and ongoing access to care.

The resources in this section of the Toolkit offer guidance for integrating sexual and reproductive health care into emergency management to address both immediate, lifesaving needs and to provide ongoing care to reduce long-term vulnerability to unplanned pregnancy, unsafe abortion, pregnancy and childbirth complications, HIV and other STIs, and other reproductive health challenges.
Do you have a comment, or would you like to suggest a resource for inclusion in this Toolkit? Please fill out our feedback form.

Resources:

- **Building National Resilience for Sexual and Reproductive Health: Learning from Current Experiences**

There has been a recent increase in efforts to integrate sexual and reproductive health into emergency and disaster risk management for health have yielded many lessons. These efforts take a non-linear path based on opportunities, honest reflection and iterative processes. Further, where response capacity is overwhelmed in spite of preparedness efforts, adaptability and flexibility are essential to continuous improvement.

Critical areas for successful integration include: advocacy, coordination and partnerships, capacity-building, leadership, ownership, inclusion of community and at-risk groups, resilient primary health care systems, and financing. Community capacity programs are needed, as well as evidence and tools to support them. A strong evidence base of best practices can prevent SRH from being sidelined at the community level, laying the groundwork for optimal response when crises occur.

This analysis reviews programs from Eastern Europe and Central Asia region, Macedonia, and Pakistan.

- **When She Needs it Most: Access to RH Supplies in Humanitarian Settings**

More than 32 million women and girls of reproductive age worldwide require humanitarian assistance. Women and girls affected by conflict and disasters are at increased risk of unintended pregnancy, unsafe abortion, and maternal morbidity and mortality, making their need and demand for RH supplies — including contraceptives and maternal health products — even more acute. With millions of women and girls displaced globally, meeting their RH needs is also critical to achieving FP2020 commitments and global development goals. Ensuring access to RH supplies across the humanitarian relief to development continuum safeguards hard-won gains in RH commodity security from being rolled back during times of crisis.

This webinar will provide background on the key RH supply chain challenges across contexts affected by crises, from emergency response to recovery and preparedness. It is the first in a
series of webinars, co-hosted by the Inter-agency Working Group (IAWG) for Reproductive Health in Crises, to explore the particular RH supply challenges and opportunities in crisis-affected settings and the potential for collaboration across these coalitions to improve access to RH supplies in all contexts.

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**Facilitator’s Kit: Community Preparedness for Reproductive Health and Gender**

This provisional facilitator’s kit includes training preparation, a full 3-day curriculum with information and activities, handouts for participants, PowerPoint presentations, and an appendix of resources. Day 1 focuses on introducing localized risks; Day 2 teaches understanding of reproductive health, including gender-based violence in emergencies; Day 3 takes participants from knowledge to action.

This curriculum is designed to be participatory. It is also meant to be flexible enough to address the needs and interests of training participants in each context. A suggested agenda and set of activities is provided in this kit. However, facilitators and trainers are encouraged to use supplemental tools, materials and resources to craft a context-specific and individualized training to achieve a community’s goals. In the curriculum’s online version, supplemental materials are linked throughout. In the curriculum’s print version, supplemental materials are noted through links within the text, and also in the appendix at the end.

Disaster risk reduction (DRR) activities are ideally focused at the local/community level and
address localized risks. Yet such efforts require significant support from leadership at the local, regional and national level. Preparedness activities are more effective when community members and government bodies work together to mitigate the risks and vulnerabilities to an emergency. At the end of this three-day training, community members produce reproductive health and gender action plans that should then be discussed with Barangay officials and representatives of the Local Government Units (LGUs). Community-driven action plans can inform and complement government-focused activities, such as contingency planning, emergency preparedness and resilience-building initiatives.

- **The Intersection of Sexual and Reproductive Health and Disability**

This report examines the specific risks, needs and barriers that refugees with disabilities face in accessing sexual and reproductive health services and their capacities and practical ways to overcome these challenges. Findings are based on findings from three humanitarian settings: urban refugees in Kampala, Uganda and camp-based refugees in Kakuma, Kenya, and camp-based refugees in Nepal.

- **Tool for the Assessment of Countries' Readiness to Provide Minimum Initial Service Package for Sexual and Reproductive Health during a Humanitarian Crisis**

This tool assesses a country’s readiness to provide Minimum Initial Service Package for SRH during a humanitarian crisis.

- **Improving Reproductive Health Services for Forcibly Displaced Women**

This resource focuses on women's reproductive health and the services available for those forcibly displaced from their homes. It discusses the gap, the challenges, and future priorities.

- **Universal & Adaptable Information, Education & Communication (IEC) Templates on The MISP**
The universal templates are available for agencies to draw in features that contextualize the images to their setting (such as hair, clothing). The suggested text is available in English, and also Arabic, Burmese, Somali and Swahili to insert into the blank templates.

- **Women are the Fabric: Reproductive Health for Communities in Crisis**

Women form the backbone of families and communities. When emergencies strike, their important contributions become even more vital. But in times of crisis, the particular strengths and vulnerabilities of women are often overlooked in the rush to provide humanitarian assistance. This booklet describes the ways in which UNFPA works with partners to ensure that the specific needs of women are factored into the planning of all humanitarian assistance and addresses urgent reproductive health needs that are sometimes forgotten. This publication includes several stories from the field.

- **Integrating Sexual and Reproductive Health into Health Emergency and Disaster Risk Management**

This policy brief discusses the integration of SRH in all aspects of health emergency and disaster risk management, both for immediate health needs, such as saving lives in obstetric complications and preventing disease, as well in the long-term to reduce vulnerability and to support sustainable development of health systems and communities.

- **Minimum Initial Service Package (MISP) for Reproductive Health in Crisis Situations**

The distance learning module for the Minimum Initial Service Package was newly revised in 2011. This site allows you to review the module content, test your knowledge with chapter quizzes, and become certified in the module by registering and completing a final post-test.

- **Inter-agency Reproductive Health Kits for Crisis Situations (5th ed.)**

Reproductive health had previously rarely been considered in responses to humanitarian emergencies and, with this in mind, the concept of a minimal initial service package (MISP) was developed at the Inter-Agency Symposium on Reproductive Health in Emergency
Situations held in June 1995.

The Reproductive Health Kits have been designed to facilitate the provision of reproductive health services during the early phase of a crisis. They contain essential drugs, supplies and equipment to be used for a limited period of time and a specific number of people. Once basic reproductive health services have been established, the reproductive health coordinator should analyse the situation, assess the needs and re-order medicines, disposables and equipment based on consumption of these items, in order to ensure that the reproductive health programme can be sustained.

The Kits are now in their fourth version. This booklet provides information on their contents, use and ordering procedures as of January 2011.

- **Inter-Agency Field Manual on Reproductive Health in Humanitarian Settings: 2010 Revision for Field-Testing**

The 2010 Inter-agency Field Manual on Reproductive Health in Humanitarian Settings is an update of the 1999 Reproductive Health in Refugee Situations: An Inter-agency Field Manual, the authoritative guidance on reproductive health interventions in humanitarian settings.

The 2010 version provides additional guidance on how to implement the Minimum Initial Service Package (MISP) for Reproductive Health, a minimum standard of care in humanitarian response. It also splits the original chapter on HIV and Sexually Transmitted Infections (STIs) into two separate chapters to accommodate new guidance on HIV programming. A new chapter on Comprehensive Abortion Care has been developed to cover more than post-abortion care. The chapters on Program Design, Monitoring and Evaluation and Adolescent Reproductive Health have been placed earlier in the manual to address the cross-cutting nature of these topics. Information on human rights and legal considerations has been integrated into each of the thematic chapters to ensure that program staff can address rights-related concerns.

The updated information is based on normative technical guidance of the World Health Organization. It also reflects the good practices documented in crisis settings around the world since the initial field-test version was released in 1996. The latest edition reflects the wide application of the Field Manual’s principles and technical content beyond refugee situations, extending its use into diverse crises, including conflict zones and natural disasters.

- **SPRINT Facilitator’s Manual**
This manual will take you through the various steps needed to facilitate the Training on the Minimum Initial Service Package (MISP) for Sexual and Reproductive Health in Crises in your setting.

- **Health Library for Disasters - Reproductive Health, Child Health and Immunization section**

  The Health Library for Disasters (HELID) is the most complete electronic information resource on public health for emergency preparedness and response and complex emergencies. An inter-agency effort, HELID contains more than 650 full-text documents, including technical guidelines, manuals, field guides, disaster chronicles, case studies, emergency kits, newsletters, and other training materials.

- **WHO Technical Guidelines for Health Emergencies**

  This page on the World Health Organization web site contains links to many tools and guidance documents for emergency and humanitarian action. The information resources available on this site address the following issues:

  1. General management and health systems
  2. Dead bodies
  3. Management of hazardous and infectious waste
  4. Health assessment
  5. **Women and children**
  6. Water and sanitation
  7. Communicable diseases
  8. Vaccines and Immunization
  9. Food safety and nutrition
  10. Psychological support
  11. Logistics and supplies
Reproductive Health Assessment Toolkit for Conflict-Affected Women

This toolkit is designed for organizations seeking to collect and interpret reproductive health data for a population in crisis. It provides organizations with tools that team members will need to implement a successful assessment. Step-by-step instructions are provided to help accurately assess the reproductive health needs of the target population.

Reproductive Health in Emergency Situations

This resource focuses on the importance of reproductive health services in emergency situations. It defines the terms and phases of conflict and then discusses the methodological challenges of evaluating reproductive health programs in these emergency settings.

Reproductive Health Services for Refugees and Internally Displaced Persons

This resource provides a series of evaluation reports and PowerPoint presentations focused on the reproductive health services for refugees and internally displaced persons. The evaluation reports and presentations discuss the coverage of RH services, the quality and access to RH services, and the use and assessment of the Minimum Initial Service Package (MISP).

Family Planning
Many people in humanitarian settings wish to avoid pregnancy and childbirth during times of emergency or displacement. However, those who leave home quickly might not be able to bring their contraceptives with them or access new ones at their point of shelter.

In a 2010 statement, the Inter-agency Working Group (IAWG) on Reproductive Health in Crises stressed the importance of making a range of contraceptive methods, including condoms, pills, injectables, emergency contraception, and intrauterine devices (IUDs) available in humanitarian settings. The IAWG recommends that comprehensive family planning programming be implemented as the situation stabilizes. Implementation involves staff training, community education, logistics and supply chain management, and developing a client follow-up system. Offering family planning services in humanitarian settings has many benefits. Family planning:

- Allows families to time, space, and limit their pregnancies.
- Helps prevent unwanted pregnancy and unsafe abortion.
- Enables more efficient post-crisis recovery, development, and economic stability.
- Helps prevent the transmission of HIV and other STIs.

The resources in this section of the Toolkit examine the barriers to family planning in humanitarian settings and offer insight as to how to effectively implement contraceptive services in and around crisis situations.

Do you have a comment, or would you like to suggest a family planning resource for inclusion in this Toolkit? Please fill out our feedback form.

Resources:

- **Family Planning Saves Lives and Promotes Resilience in Humanitarian Contexts**

  The Family Planning Summit (FP Summit), convened in London on 11 July 2017, presents a critical opportunity to accelerate efforts to deliver family planning to women and girls globally?including those affected by humanitarian crises. Building on this momentum, the
International Rescue Committee, in partnership with Care, Save the Children and the Women?s Refugee Commission, organized a donor consultation on June 7, 2017 to seek input from donors and stakeholders to shape messages and recommendations for the London FP summit. This paper is a synthesis of the findings developed through both consultations and identifies collaborative solutions and actions to be taken at the FP Summit and beyond.

- **Community-Based Distribution of Family Planning Services in Humanitarian Settings: Identified Need and Potential from Malakal, South Sudan**

This report is based on results of a community-based pilot project by the Women?s Refugee Commission, the American Refugee Committee and the Centers for Disease Control and Prevention, looking at community-based distribution of family planning.

- **Universal & Adaptable Information, Education & Communication (IEC) Templates on Family Planning**

These adaptable IEC templates allow health care providers to counsel family planning clients. The "universal templates" are available for agencies to draw in features that contextualize the images to their setting (such as hair, clothing). The "variation templates" are based on the "universal templates," and have been adapted to represent four broad ethnic categories. The suggested text is available in English, and also Arabic, Burmese, Somali and Swahili to insert into the blank templates.

- **Adolescent Sexual and Reproductive Health Programs in Humanitarian Settings: An In-depth Look at Family Planning Services**

This report summarizes the findings of a year-long exercise to map existing adolescent sexual and reproductive health programs that have been implemented since 2009 and document good practices. It also offers recommendations for integrating sexual and reproductive health and family planning services for adolescents in humanitarian settings.

- **Emergency Contraception for Crisis Settings: Key**
Resources

This document highlights resources-- including websites, technical guidelines, and articles-- that provide information on the provision of ECs in crisis settings, including for refugee and internally displaced persons (IDP) populations.

- **Refocusing Family Planning in Refugee Settings: Findings and Recommendations from a Multi-Country Baseline Study**

  This multi-country baseline study documents knowledge of family planning, beliefs and practices of refugees, and the state of service provision in select refugee settings in Djibouti, Jordan, Kenya, Malaysia, and Uganda.

- **Inter-Agency Field Manual on Reproductive Health in Humanitarian Settings: 2010 Revision for Field-Testing**

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  The 2010 version provides additional guidance on how to implement the Minimum Initial Service Package (MISP) for Reproductive Health, a minimum standard of care in humanitarian response. It also splits the original chapter on HIV and Sexually Transmitted Infections (STIs) into two separate chapters to accommodate new guidance on HIV programming. A new chapter on Comprehensive Abortion Care has been developed to cover more than post-abortion care. The chapters on Program Design, Monitoring and Evaluation and Adolescent Reproductive Health have been placed earlier in the manual to address the cross-cutting nature of these topics. Information on human rights and legal considerations has been integrated into each of the thematic chapters to ensure that program staff can address rights-related concerns.

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Emergency Contraception for Conflict Affected Settings: A Reproductive Health Response in Conflict Consortium Distance Learning Module

This module was developed to meet the need for increased awareness and knowledge about emergency contraception (EC) among health service providers working with refugee and internally displaced populations (IDPs). A distance learning method helps to increase access to information about EC, promotes flexibility, assures quality information, empowers learners and is cost-effective.

Maternal and Child Health

The World Health Organization estimates that worldwide, 800 women die each day from preventable causes related to pregnancy and childbirth. Ninety-nine percent of all maternal deaths occur in developing countries, and mortality rates are higher among rural areas, poorer communities, and humanitarian settings.

Like women anywhere, women in humanitarian settings, and their babies, need comprehensive health care during pregnancy, delivery, and the postpartum period. Critical maternal and child health services include risk screening, management of pregnancy complications, nutrition guidance and support, health education, skilled birth attendance, breastfeeding support, postpartum family planning, infant immunization and well-baby visits, and more.

This section of the Toolkit offers guidance and tools for providing a range of maternal and child health services in crisis situations. Do you have a comment, or would you like to suggest a maternal and child health resource for inclusion in this Toolkit? Please fill out our feedback form.

Resources:
MISP Process Evaluation (2017)

To facilitate a standardized approach to assessing the MISP, the Women’s Refugee Commission led a three-year, inter-agency initiative to develop comprehensive tools for undertaking a MISP assessment ideally within the first three months following the onset of a humanitarian emergency.

Universal & Adaptable Information, Education & Communication (IEC) Templates on The MISP

The universal templates are available for agencies to draw in features that contextualize the images to their setting (such as hair, clothing). The suggested text is available in English, and also Arabic, Burmese, Somali and Swahili to insert into the blank templates.

Guide to Maternal, Newborn and Child Health and Nutrition in Emergencies

This guide aims to:

- better define focus areas of response for direct humanitarian programming and advocacy in acute phase of an emergency
- build consistency around a discrete 'package' of effective MNCH and nutrition services delivered in an acute phase of a disaster
- provide a clear rationale for expanded approaches and interventions for more comprehensive MNCH and nutrition, which may require operational research, strategic training, collaborative partnerships and more stable situations.

Minimum Initial Service Package (MISP) for Reproductive Health in Crisis Situations

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- **Recommendations for Prenatal Care and Delivery Care in Emergencies**

It is crucial to consider the prevention of pregnancy complications and avoid childbirth in unsafe conditions during emergencies. These guidelines were prepared by the technical
WHO Technical Guidelines for Health Emergencies

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3. Management of hazardous and infectious waste
4. Health assessment
5. Women and children
6. Water and sanitation
7. Communicable diseases
8. Vaccines and Immunization
9. Food safety and nutrition
10. Psychological support
11. Logistics and supplies

HIV and Sexually Transmitted Infections

The risk of HIV transmission increases in humanitarian settings for many reasons. Factors that contribute to this heightened risk can include:

- Disruption of family and social structures
Quality reproductive health, family planning, and HIV information and services can help prevent the spread of HIV and ensure those living with HIV have access to lifesaving treatment and supportive care. This section of the Toolkit offers guidelines and tools for addressing STIs, HIV, and AIDS in humanitarian settings. Do you have a comment, or would you like to suggest an HIV or STI prevention or treatment resource for inclusion in this Toolkit? Please fill out our feedback form.

Resources:

- **HIV and Infant Feeding in Emergencies: Operational Guidance**

Many millions of people around the world are affected by emergencies, the majority of whom are women and children. Among them are many who are known to be living with HIV and others who may not know their HIV status.

The purpose of this document is to provide operational guidance on HIV and infant feeding in emergencies. It is intended to be used to complement emergency and sectoral guidelines on health, nutrition and HIV, including specifically infant feeding, prevention of mother-to-child transmission of HIV and paediatric antiretroviral treatment. The envisaged target audience consists of decision-makers, policy-makers, national and subnational government managers and planners, managers of refugee camps and similar settlements for displaced persons, and managers and planners in United Nations agencies, nongovernmental organizations and other groups responding to humanitarian situations, as well as donors.
This operational guidance is based on a consultation convened by the World Health Organization, the United Nations Children’s Fund and the Emergency Nutrition Network in Geneva in September 2016, which brought together a cross-section of senior-level participants from United Nations agencies, government, nongovernmental organizations, academia, and other agencies working in nutrition and HIV in emergencies. A background paper for the meeting presented experiences from the field.

**MISP Process Evaluation (2017)**

To facilitate a standardized approach to assessing the MISP, the Women’s Refugee Commission led a three-year, inter-agency initiative to develop comprehensive tools for undertaking a MISP assessment ideally within the first three months following the onset of a humanitarian emergency.

**Inter-Agency Task Team (IATT) Prevention of Mother-to-Child Transmission of HIV (PMTCT) in Humanitarian Settings Guidelines**

In May 2015, the IATT developed two new resources for PMTCT in humanitarian settings:

- **Guideline Part I: Lessons Learned and Recommendations** is a synthesis of experiences from the field, based on key informant interviews, a systematic literature review, existing guidelines, and grey literature on PMTCT programming in humanitarian action.

- **Guideline Part II: Implementation Guide** is a practical series of tools that builds on Part I and developed to improve the implementation of PMTCT services. These guidelines focus on PMTCT health service delivery—including preparedness actions for shocks, continuation, and the initiation of antiretroviral treatment (ART) for women, when possible.

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Guidelines for Addressing HIV in Humanitarian Settings

In 2004, the Inter-Agency Standing Committee (IASC) issued the guidelines Addressing HIV/AIDS Interventions in Emergency Settings to help guide those involved in emergency response, and those responding to the epidemic, to plan the delivery of a minimum set of HIV prevention, care and support interventions to people affected by humanitarian crises. This revised version of the guidelines, Addressing HIV in Humanitarian Settings, draws on the experiences of governments; UN, inter-governmental and nongovernmental organizations; and the Red Cross Red Crescent movement; and on recent developments in the field.

The guidelines have been updated to take into account improvements in humanitarian coordination; the growing understanding that antiretroviral therapy can be provided in low-resource settings, including in conflict zones; how quality HIV programming can be achieved when resources and personnel are pooled; and a shared concern that an understanding of all the facets of HIV prevention, treatment, care and support, and of the relevant human rights considerations, is an essential part of preparedness for humanitarian crises.

Inter-Agency Field Manual on Reproductive Health in Humanitarian Settings: 2010 Revision for Field-Testing

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HIV/AIDS Prevention and Control: A Short Course for Humanitarian Workers

This facilitator’s manual provides teacher’s and facilitators with guidance and step-by-step direction through each day of the course. Given the clear need to address HIV/AIDS in conflict settings and opportunities which humanitarian interventions may bring, this course has been developed on HIV/AIDS prevention and control for humanitarian workers. It is primarily targeted at health program management staff and clinical staff. It also aims to deepen individual understanding of the complexities of HIV/AIDS and to equip participants with knowledge and skills to improve HIV/AIDS program design and implementation.

Young People

Today’s world is home to an unprecedented 1.8 billion young people ages 10 to 24. Yet their sexual and reproductive health needs are often overlooked.

Young people face unique challenges during humanitarian emergencies. Often their family and social structures are disassembled, and their educational or community programs are discontinued. When separated from their families and communities and removed from their social networks, young people might find themselves in adult or risky situations without the support of parents or other role models. This loss of economic and social stability makes adolescents increasingly vulnerable to poverty, violence, sexual exploitation and abuse, and reproductive health challenges including HIV and STI infection, unwanted pregnancy, and unsafe abortion.

Health workers in humanitarian settings need training to provide youth-friendly reproductive health services, which share the following characteristics:

- Providers communicate with young people in a respectful and nonjudgmental manner.
- The facility enforces privacy and confidentiality policies for young people.
- The facility has convenient hours and location, and a welcoming environment, for young
people.

- The services are affordable.
- Young people participate in the development and implementation of policies and services.

This section of the Toolkit contains tools and guidance on providing youth-friendly reproductive health and related services in humanitarian settings. Do you have a comment, or would you like to suggest a resource on youth-friendly services for inclusion in this Toolkit? Please fill out our feedback form.

Resources:

- **MISP Process Evaluation (2017)**

  To facilitate a standardized approach to assessing the MISP, the Women’s Refugee Commission led a three-year, inter-agency initiative to develop comprehensive tools for undertaking a MISP assessment ideally within the first three months following the onset of a humanitarian emergency.

- **A Girl No More: The Changing Norms of Child Marriage in Conflict**

  Parents’ decision to marry off their young daughters is influenced by concerns about poverty, protection from rape and its stigma, prevention of pregnancy outside marriage, and from the influence of other communities – all issues exacerbated by displacement. Rather than solving these problems, child marriage isolates girls from what opportunities exist.

  Nine of the top 10 countries with the highest rates of child marriage are fragile states. Yet married girls are invisible in humanitarian programming.

  This research suggests that when girls have access to education and other programming and when families have their basic needs met, child marriage can be reduced.

**Recommendations:**

1. Donors, national governments, policy makers, and programmers should ensure that the basic needs of families are met.

2.
Donors, national governments, policy makers, and programmers should invest in girls in order to build and reinforce girls’ intrinsic value within communities.

3. Programmers should ensure that adolescent girls, including child-brides and adolescent mothers, are identified and reached with programming.

4. Policy makers and donors should recognize that child marriage is best addressed across a variety of sectors.

5. Policy makers and donors should understand the importance of, and provide support to, assessment and adaptation.

6. Donors and policy makers should support the piloting of child marriage interventions and the documentation of learning.

• **Empowered and Safe: Economic Strengthening for Girls in Emergencies**

These resources outline how economic strengthening can mitigate girls' risk of gender-based violence, outlining promising practices from both humanitarian and development contexts.

• **Including Adolescent Girls with Disabilities in Humanitarian Programs**

Adolescent girls with disabilities and girls who live in households with persons with disabilities are often overlooked in humanitarian programming. The following principles show how to foster their participation and to strengthen protective assets. This mitigates their risk of violence, abuse and exploitation.

• **I'm Here: Adolescent Girls in Emergencies Report**

A resource for emergency response staff, this outlines an operational approach and
recommendations that can help humanitarian sectors be more accountable to adolescent girls from the start of an emergency.

- **Strong Girls, Powerful Women: Program Planning and Design for Adolescent Girls in Humanitarian Settings**

  This guide is intended for humanitarian practitioners to more effectively identify and address the unique needs of adolescent girls in displacement and crisis settings. It also provides donors and policymakers with guidance on how to make sustainable impact for adolescent girls.

- **Very Young Adolescents in Humanitarian Settings: Examining the Sexual and Reproductive Health Needs and Risks**

  This document provides an examination of very young adolescents' (ages 10-14) sexual and reproductive health needs and risks, based on research in Ethiopia, Lebanon, and Thailand.

- **In Double Jeapardy: Adolescent Girls and Disasters**


  Report findings show that when disaster strikes, girls are discriminated against when they are at their most vulnerable. Adolescent girls have particular needs for protection, healthcare and education that are not being met, and are largely overlooked by governments and the humanitarian community.

  Findings also reveal that during emergencies:

  - Girls are given less food when it is scarce
  - Girls are less likely to be rescued than boys
  - Boys generally received preferential treatment over girls in rescue efforts
  - Girls are more likely to be pulled out of school and less likely to return
  - Disasters and emergencies increase the likelihood of girls being forced into child marriage, domestic work or sexual abuse.

  The 2013 report says donors, governments, decision-makers and the humanitarian
community must start listening to what girls have to say in order to understand their different needs in emergencies, and to empower them to play a role in planning and preparing for, and enduring disasters.

Further recommendations include:

○ Consult adolescent girls in all stages of disaster preparedness and response.
○ Train and mobilize more women to work in emergency response teams.
○ Provide services that target adolescent girls in the areas of education, protection and sexual and reproductive health.
○ Ensure funding for protection against gender-based violence in the first stages of emergency response.
○ Collecting separate data for boys and girls, men and women to show the specific needs of adolescent girls in emergencies and to inform program planning.

**Adolescent Sexual and Reproductive Health Programs in Humanitarian Settings: An In-depth Look at Family Planning Services**

This report summarizes the findings of a year-long exercise to map existing adolescent sexual and reproductive health programs that have been implemented since 2009 and document good practices. It also offers recommendations for integrating sexual and reproductive health and family planning services for adolescents in humanitarian settings.

**Minimum Initial Service Package (MISP) for Reproductive Health in Crisis Situations**

The distance learning module for the Minimum Initial Service Package was newly revised in 2011. This site allows you to review the module content, test your knowledge with chapter quizzes, and become certified in the module by registering and completing a final post-test.

**Adolescent Sexual and Reproductive Health Toolkit for Humanitarian Settings: A Companion to the Inter-Agency Field Manual on Reproductive Health in Humanitarian Settings**

This Toolkit is intended to guide humanitarian programme managers and healthcare
providers to ensure that sexual and reproductive health interventions put into place both during and after a crisis are responsive to the unique needs of adolescents.

It provides user-friendly tools for assessing the impact of a crisis on adolescents, implementing an adolescent-friendly Minimum Initial Service Package, and ensuring that adolescents can participate in the development and implementation of humanitarian programmes. Other tools are specifically designed for healthcare providers to help them be more effective in providing and tracking services for adolescents at the clinic and community levels.

The Toolkit was created by Save the Children and UNFPA, under the guidance of a Technical Advisory Group comprised of UNICEF, UNHCR, Women’s Refugee Commission, IRC, RAISE, Pathfinder International, JSI, CDC and Columbia University.

It is a companion to the Inter-Agency Field Manual on Reproductive Health in Humanitarian Settings.

- **RapidFTR**

In every emergency, whether a natural disaster or an armed conflict, the commotion of survival and flight leads to the separation of children from their caregivers, leaving children vulnerable to violence, economic and sexual exploitation, and trafficking. Current practices to document separated children are outdated, inefficient and paper-driven. As a result, precious hours and days are lost in efforts to reunite children with their caregivers.

RapidFTR is a versatile open-source mobile phone application and data storage system that seeks to expedite this process by helping humanitarian workers collect, sort and share information about unaccompanied and separated children in emergency situations so they can be registered for care services and reunited with their families. RapidFTR is specifically designed to streamline and speed up Family Tracing and Reunification (FTR) efforts both in the immediate aftermath of a crisis and during ongoing recovery efforts.

RapidFTR is an open source, volunteer-driven project, under active development by the Child Protection in Emergencies Team at UNICEF, and has received funding from the Humanitarian Innovation Fund and UNICEF Supply Division.

- **E-Learning Course on Adolescent and SRH in Humanitarian Settings**

This one-hour interactive learning course will take you to the fictional earthquake-stricken country of Loucria. Follow Kim from organization Project Youth as she meets adolescents affected by the earthquake and define which interventions should be put in place for and with
Gender

A disaster or emergency situation affects women, men, girls, and boys differently. These differences must be considered when planning and implementing reproductive health services in humanitarian settings. The World Health Organization (WHO) outlines a number of gender considerations in disaster assessment. For example, how do the gender norms in a particular community affect assistance-seeking behavior or access to aid? Are there particular vulnerabilities for women, men, or children that result from the crisis? To address these and other considerations, WHO recommends the following principles of good practice:

- Involve women in all stages of decision making. Make sure that information about the needs of the family or community is obtained from men and women.
- Collect data disaggregated by sex, and use this data for program planning and for documentation of short- and long-term effects.
- Identify and provide for sex-specific needs.
- Consider and assess the impact of all response activities on men and women.
- Pay special attention to those who might experience some social exclusion (widows, female heads of household, disabled women).
- Include women as distributors to ensure they can access supplies without being placed at increased risk of injury or abuse.

The resources in this section of the Toolkit explore the different needs of men, women, girls, and boys in humanitarian settings and provide guidance on how to effectively address these needs so that all members of the affected population can access the reproductive health information and care they need to stay safe and healthy.

Do you have a comment, or would you like to suggest a resource on gender for inclusion in this Toolkit? Please fill out our feedback form.

Resources:
The Gender Handbook for Humanitarian Action

The Inter-Agency Standing Committee (IASC) published the original Women, Girls, Boys and Men. Different Needs ? Equal Opportunities: Gender Handbook in Humanitarian Action in 2006. The purpose of the handbook was to provide humanitarian actors with guidance on gender analysis, planning and actions to ensure that the needs, priorities and capacities of women, girls, men and boys are considered in all aspects of humanitarian response. The first edition predated the more recent humanitarian reform and Transformative Agenda processes and as such, did not reflect the current iteration of the sector system, the IASC Gender Marker, the Humanitarian Programme Cycle and other advances in humanitarian coordination, leadership, accountability and partnership. After wide consultations with IASC members, sector leaders, field users and donors, the Gender Handbook has been updated. The revised version is a concise guide built upon lessons learned by the humanitarian community and reflects the main challenges faced in ensuring that gender is adequately integrated into humanitarian planning and programming. The handbook is complemented by detailed information found in the regularly updated online platform. The review of the handbook was undertaken by the IASC Gender Reference Group in 2016. It was endorsed by the IASC to meet collective commitments on gender equality in humanitarian action.

Placing Women and Girls at the Centre of Humanitarian Action

This graphic provides facts, figures, and key priorities for keeping women and girls as a focus during disasters and humanitarian response.

Facilitator's Kit: Community Preparedness for Reproductive Health and Gender

This provisional facilitator's kit includes training preparation, a full 3-day curriculum with information and activities, handouts for participants, PowerPoint presentations, and an appendix of resources. Day 1 focuses on introducing localized risks; Day 2 teaches understanding of reproductive health, including gender-based violence in emergencies; Day 3 takes participants from knowledge to action.

This curriculum is designed to be participatory. It is also meant to be flexible enough to address the needs and interests of training participants in each context. A suggested agenda and set of activities is provided in this kit. However, facilitators and trainers are encouraged to use supplemental tools, materials and resources to craft a context-specific and individualized training to achieve a community?s goals. In the curriculum?s online version, supplemental
materials are linked throughout. In the curriculum’s print version, supplemental materials are noted through links within the text, and also in the appendix at the end.

Disaster risk reduction (DRR) activities are ideally focused at the local/community level and address localized risks. Yet such efforts require significant support from leadership at the local, regional and national level. Preparedness activities are more effective when community members and government bodies work together to mitigate the risks and vulnerabilities to an emergency. At the end of this three-day training, community members produce reproductive health and gender action plans that should then be discussed with Barangay officials and representatives of the Local Government Units (LGUs). Community-driven action plans can inform and complement government-focused activities, such as contingency planning, emergency preparedness and resilience-building initiatives.

• **State of the World Population 2015: Shelter from the Storm? A Transformative Agenda for Women and Girls in a Crisis-Prone World**

More than 100 million people are in need of humanitarian assistance?more than at any time since the end of the Second World War. Among those displaced by conflict or uprooted by disaster are tens of millions of women and adolescent girls. This report is a call to action to meet their needs and ensure their rights.

• **Facilitator’s Kit: Community Preparedness for Reproductive Health and Gender: A Provisional Resource for Communities in Disaster-Prone Areas**

This provisional Facilitator’s Kit provides a complete framework for a 3-day training on Community Preparedness for Reproductive Health and Gender. The goal is to build community capacity to prepare and respond to risks and inequities faced by women and girls during emergencies.

• **In Double Jeopardy: Adolescent Girls and Disasters**

Plan’s 2013 *State of the World’s Girls* report looks at what happens to adolescent girls when disaster strikes around the world, and why.

Report findings show that when disaster strikes, girls are discriminated against when they are at their most vulnerable. Adolescent girls have particular needs for protection, healthcare and
education that are not being met, and are largely overlooked by governments and the humanitarian community.

Findings also reveal that during emergencies:

- Girls are given less food when it is scarce
- Girls are less likely to be rescued than boys
- Boys generally received preferential treatment over girls in rescue efforts
- Girls are more likely to be pulled out of school and less likely to return
- Disasters and emergencies increase the likelihood of girls being forced into child marriage, domestic work or sexual abuse.

The 2013 report says donors, governments, decision-makers and the humanitarian community must start listening to what girls have to say in order to understand their different needs in emergencies, and to empower them to play a role in planning and preparing for, and enduring disasters.

Further recommendations include:

- Consult adolescent girls in all stages of disaster preparedness and response.
- Train and mobilize more women to work in emergency response teams.
- Provide services that target adolescent girls in the areas of education, protection and sexual and reproductive health.
- Ensure funding for protection against gender-based violence in the first stages of emergency response.
- Collecting separate data for boys and girls, men and women to show the specific needs of adolescent girls in emergencies and to inform program planning.

We Can't Wait: A Report on Sanitation and Hygiene for Women and Girls

Poor sanitation is an issue that can affect everyone but women and girls are often the most at risk. The result is widespread death and disease ? especially among children ? and social marginalization. Poor sanitation exposes females to the risk of assault, and when schools cannot provide clean, safe toilets girls? attendance drops. The international community acknowledged the importance of sanitation by including targets in the Millennium Development Goals. The 2015 deadline is approaching quickly but the crisis is far from resolved.

Gender and Shelter

This briefing paper looks at the importance of gender within Red Cross programs and services and offers some suggestions about how Red Cross and Red Crescent Societies...
might better integrate gender into shelter programs. This paper can be used as a tool during gender training, as an information sheet for staff and volunteers, at the governance level, and as part of education and advocacy activities within a Society.

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**Different Needs - Equal Opportunities: Increasing Effectiveness of Humanitarian Action for Women, Girls, Boys and Men**

Published in 2010, this online course provides the basic steps a humanitarian worker must take to ensure gender equality in programming. The course includes information on the core issues of gender and how it relates to other aspects of humanitarian response. The three hour, self-paced course provides information and scenarios which enable you to practice developing gender-sensitive programming. This training is based on the Inter-Agency Standing Committee (IASC) Gender Handbook and related IASC guidelines, including the Guidelines for Gender-based Violence Interventions in Humanitarian Settings and others. The IASC consists of twenty-one humanitarian organizations and is the primary humanitarian forum for facilitating coordination, policy development and decision-making in response to complex emergencies and natural disasters.

•

**Gender and Disaster Network**

The Gender and Disaster Network is an educational project initiated by women and men interested in gender relations in disaster contexts. The GDN aims to use the Internet and other forms of new media in support of a global network of researchers and practitioners.

•

**WHO Technical Guidelines for Health Emergencies**

This page on the World Health Organization web site contains links to many tools and guidance documents for emergency and humanitarian action. The information resources available on this site address the following issues:

1. General management and health systems
2. Dead bodies
3. Management of hazardous and infectious waste
4. Health assessment
Gender-Based Violence

UNFPA defines gender-based violence as encompassing a wide range of harmful acts, including sexual abuse of children, rape, domestic violence, sexual assault and harassment, trafficking of women and girls, and harmful traditional practices such as female genital cutting. The stresses, close living quarters, breakdown of societal and familial structures, and other challenges that often accompany humanitarian emergencies make gender-based violence a common and pressing health threat in crisis settings. The health effects of gender-based violence can be profound and long-lasting. These include:

- Unwanted pregnancy
- Unsafe abortion
- Complications from frequent, high-risk pregnancies and lack of antenatal or postpartum care
- Sexually transmitted infections, including HIV
- Physical injury
• Psychological trauma

To stem the spread of gender-based violence, gender-based inequalities and harmful norms must be addressed. The resources in this section of the Toolkit offer guidance for preventing and responding to gender-based violence in humanitarian settings.

Do you have a comment, or would you like to suggest a resource on gender-based violence for inclusion in this Toolkit? Please fill out our feedback form.

Resources:

• **More Than Numbers**

*More than Numbers* presents an overview of the situation of Syrian women and girls. It provides an introduction to gender-based violence during emergencies, the forms of gender-based violence in Syria and neighboring countries, the contributing factors, and the impact it's having on individuals, families, and communities. It also includes a list of recommendations and challenges that may help in designing strategies and programs to better address gender-based violence and influence changes of cultural norms.

• **Good Shelter Programming: Tools to Reduce the Risk of GBV in Shelter Programmes**

The purpose of this toolkit is to support shelter programme staff to reduce the risks of Gender-Based Violence (GBV) through better shelter and settlement programming and project implementation. This toolkit includes tools on assessment (Section A), Risk and Mitigation (Section B), and Responding to GBV incidents (Section C), to support better shelter programming. The toolkit supports the Inter-Agency Standing Committee (IASC) Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action (&) and aims to contextualise the advice given in a practical way for Shelter, Settlement and Recovery practitioners. The tools in this toolkit aim to help shelter practitioners to mainstream GBV risk mitigation into their shelter programming, ultimately reducing vulnerabilities to GBV, particularly for women and girls.

• **Empowered and Safe: Economic Strengthening for Girls in Emergencies**
These resources outline how economic strengthening can mitigate girls’ risk of gender-based violence, outlining promising practices from both humanitarian and development contexts.

- **Minimum Standards for Prevention and Response to Gender-based Violence in Emergencies**

  Gender based violence is a life-threatening, global health and human rights issue that violates international human rights law and principles of gender equality. In emergencies, such as conflict or natural disasters, the risk of violence, exploitation and abuse is heightened, particularly for women and girls. UNFPA’s Minimum Standards for Prevention and Response to GBV in Emergencies (GBViE) promote the safety and well being of women and girls in emergencies and provide practical guidance on how to mitigate and prevent gender-based violence in emergencies and facilitate access to multi-sector services for survivors.

- **Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action: Reducing Risk, Promoting Resilience, and Aiding Recovery**

  The GBV Guidelines have been revised from the 2005 version by an inter-agency Task Team led by UNICEF and UNFPA, and endorsed by the IASC in 2015.

  The purpose of the Guidelines is to assist humanitarian actors and communities affected by armed conflict, natural disasters and other humanitarian emergencies to coordinate, plan, implement, monitor and evaluate essential actions for the prevention and mitigation of GBV across all sectors of humanitarian response.

  The overall goal of the Guidelines is to support humanitarian stakeholders in fulfilling their responsibility to protect all those affected by crises, by:

  1) Reducing risk of GBV by implementing GBV prevention and mitigation strategies from pre-emergency to recovery stages of humanitarian action.

  2) Promoting resilience by strengthening national and community-based systems that prevent and mitigate GBV, and by enabling survivors and those at risk of GBV to access specialized
3) Aiding recovery of communities and societies by supporting local and national capacity to create lasting solutions to the problem of GBV.

• **Managing Gender-based Violence Programmes in Emergencies: eLearning Course**

This 146-page guide features the entire e-learning course transcript as well as new material, including: "Programmes in Focus" - illustrative examples of GBV programming in action; "Voices from the Field" - first-person accounts from practitioners like you who have experienced and implemented the concepts covered in the Course; and "Thinking Locally" - short segments that encourage you to consider how you would apply course concepts to your own context. We have also included additional case study questions that will allow you to explore the content more thoroughly.

• **Inter-Agency Field Manual on Reproductive Health in Humanitarian Settings: 2010 Revision for Field-Testing**

The 2010 Inter-agency Field Manual on Reproductive Health in Humanitarian Settings is an update of the 1999 Reproductive Health in Refugee Situations: An Inter-agency Field Manual, the authoritative guidance on reproductive health interventions in humanitarian settings.

The 2010 version provides additional guidance on how to implement the Minimum Initial Service Package (MISP) for Reproductive Health, a minimum standard of care in humanitarian response. It also splits the original chapter on HIV and Sexually Transmitted Infections (STIs) into two separate chapters to accommodate new guidance on HIV programming. A new chapter on Comprehensive Abortion Care has been developed to cover more than post-abortion care. The chapters on Program Design, Monitoring and Evaluation and Adolescent Reproductive Health have been placed earlier in the manual to address the cross-cutting nature of these topics. Information on human rights and legal considerations has been integrated into each of the thematic chapters to ensure that program staff can address rights-related concerns.

The updated information is based on normative technical guidance of the World Health Organization. It also reflects the good practices documented in crisis settings around the world since the initial field-test version was released in 1996. The latest edition reflects the wide application of the Field Manual’s principles and technical content beyond refugee situations, extending its use into diverse crises, including conflict zones and natural disasters.
Handbook for Coordinating Gender-based Violence Interventions in Humanitarian Settings

This coordination handbook represents a key tool for all sectors of the humanitarian community to work together in the prevention of and response to gender-based violence. Drawing from and building upon a growing body of international tools and resources, it provides the most comprehensive guidelines to date on how to establish coordination mechanisms to address gender-based violence in emergencies. Its purpose is to facilitate concrete action from the earliest stages of humanitarian intervention to safeguard survivors and protect those at risk, and to accelerate efforts aimed at ending gender-based violence.

• UN Action Against Sexual Violence in Conflict

UN Action Against Sexual Violence in Conflict (UN Action) unites the work of 13 UN entities with the goal of ending sexual violence in conflict. It is a concerted effort by the UN system to improve coordination and accountability, amplify programming and advocacy, and support national efforts to prevent sexual violence and respond effectively to the needs of survivors. The web site offers news and updates from the field, links to relevant NGOs, and a long list of advocacy resources.

• Gender-Based Violence Area of Responsibility

The Gender-Based Violence Area of Responsibility (GBV AoR) is the global level forum for coordinating prevention and response to GBV in humanitarian settings. The group brings together NGOs, UN agencies, academics and others under the shared objectives of ensuring more predictable, accountable and effective approaches to GBV prevention and response. Established in 2008, the GBV AoR is one of five functional components of the Global Protection Cluster, known as ?areas of responsibility?. The GBV AoR is co-led at the global level by UNFPA and UNICEF.

• WHO Technical Guidelines for Health Emergencies

This page on the World Health Organization web site contains links to many tools and guidance documents for emergency and humanitarian action. The information resources
available on this site address the following issues:

1. General management and health systems
2. Dead bodies
3. Management of hazardous and infectious waste
4. Health assessment
5. Women and children
6. Water and sanitation
7. Communicable diseases
8. Vaccines and Immunization
9. Food safety and nutrition
10. Psychological support
11. Logistics and supplies

- Gender-Based Violence in Conflict-Affected Settings

This series of resources, documents and tools focuses on gender-based violence programming and legal aid in conflict-affected settings.

Key Humanitarian Organizations
The websites of each of these humanitarian organizations offer collections of disaster relief and emergency management guidance and tools.

**Center for Refugee and Disaster Response** The Center for Refugee and Disaster Response (CRDR), at the Johns Hopkins Bloomberg School of Public Health, develops and implements emergency systems that meet the needs of underserved, vulnerable populations in crisis.

**Gender and Disaster Network** The Gender and Disaster Network is an educational project initiated by women and men interested in gender relations in disaster contexts. The GDN aims to use the Internet and other forms of new media in support of a global network of researchers and practitioners.

**Inter-Agency Standing Committee** The IASC is a unique inter-agency forum for coordination, policy development and decision-making involving the key UN and non-UN humanitarian partners. The IASC develops humanitarian policies, agrees on a clear division of responsibility for the various aspects of humanitarian assistance, identifies and addresses gaps in response, and advocates for effective application of humanitarian principles. With the Executive Committee for Humanitarian Affairs (ECHA), the IASC forms the key strategic coordination mechanism among major humanitarian actors.

**Inter-Agency Working Group (IAWG) on Reproductive Health in Crisis** The IAWG on Reproductive Health in Crises was formed in 1995 to promote access to quality reproductive health care for refugee women and others affected by humanitarian emergencies. It originally comprised more than 30 groups, including United Nations (UN) agencies, universities and governmental and nongovernmental organizations, and was led by the UN High Commissioner for Refugees (UNHCR), the World Health Organization (WHO) and the UN Population Fund (UNFPA).

**International Rescue Committee** IRC responds to the world’s worst humanitarian crises and helps people to survive and rebuild their lives. At work in over 40 countries and 25 U.S. cities to restore safety, dignity and hope, the IRC leads the way from harm to home.

**PAHO/WHO Area on Emergency Preparedness and Disaster Relief** PAHO/WHO’s Area on Emergency Preparedness and Disaster Relief works with the countries of Latin America to
improve disaster preparedness in the health sector, protect health services from the risk of disasters, support countries to respond to health needs during emergencies, and strengthen partnerships with national and international organizations.

Reproductive Health Access, Information and Services in Emergencies (RAISE) The RAISE Initiative, developed by Columbia University's Heilbrunn Department of Population and Family Health in the Mailman School of Public Health and Marie Stopes International, aims to address the full range of reproductive health needs for refugees and internally displaced persons by building partnerships with humanitarian and development agencies, governments, United Nations bodies, advocacy agencies and academic institutions.

UN Action Against Sexual Violence in Conflict UN Action Against Sexual Violence in Conflict (UN Action) unites the work of 13 UN entities with the goal of ending sexual violence in conflict. It is a concerted effort by the UN system to improve coordination and accountability, amplify programming and advocacy, and support national efforts to prevent sexual violence and respond effectively to the needs of survivors. The web site offers news and updates form the field, links to relevant NGOs, and a long list of advocacy resources.

United Nations High Commissioner for Refugees (UNHCR) The Office of the United Nations High Commissioner for Refugees is mandated to lead and co-ordinate international action to protect refugees and resolve refugee problems worldwide. Its primary purpose is to safeguard the rights and well-being of refugees. It strives to ensure that everyone can exercise the right to seek asylum and find safe refuge in another State, with the option to return home voluntarily, integrate locally or to resettle in a third country. It also has a mandate to help stateless people.

University of Wisconsin Disaster Management Center The University of Wisconsin-Disaster Management Center (UW-DMC) works closely with experts recognized for their field experience to develop disaster management training activities with a practical emphasis. The center’s goal is to help improve the emergency management performance of non-governmental organizations, local and national governments, and international organizations, through a comprehensive professional development program in disaster management.

Women's Refugee Commission The Women's Refugee Commission strives to improve the lives and protect the rights of women, children and youth displaced by conflict and crisis by researching their needs, identifying solutions and advocating for programs and policies to strengthen their resilience and drive change in humanitarian practice.

Source URL: https://www.k4health.org/toolkits/rh-humanitarian-settings