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# Global Evaluation Of RH Services For Refugees And Internally Displaced Persons

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## Component 4 Availability and Quality of Emergency Response

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# Component 4

## Objective

- Retrospective study of use of the MISIP and distribution and use of Reproductive Health Kits
- Evaluate the implementation of the MISIP during an emergency

# Component 4

## Methods

- Questionnaire (English and French)
  - Part I
    - Implementation of MISP components,
    - logistics (ordering and distribution)
    - IEC materials
  - Part II
    - Contents of the RH kits
- Recipients
  - Identified from UNFPA Procurement's Kit order lists for 2001 and 2002
  - 48 recipients in 39 countries received questionnaire

# Component 4 Results

- 33 out of 48 responded (68%)
- 28 fully completed questionnaires
- Responses analyzed in Excel and by hand

# MISP

## Minimum Initial Service Package

- Identify a reproductive health coordinator
- Prevent and manage the consequences of sexual violence
- Reduce HIV transmission
- Prevent excess neonatal and maternal morbidity and mortality
- Plan for comprehensive RH services, integrated into PHC, as soon as possible
- (Establish a data collection system to monitor services)

# Results Component 4: MISP Implementation

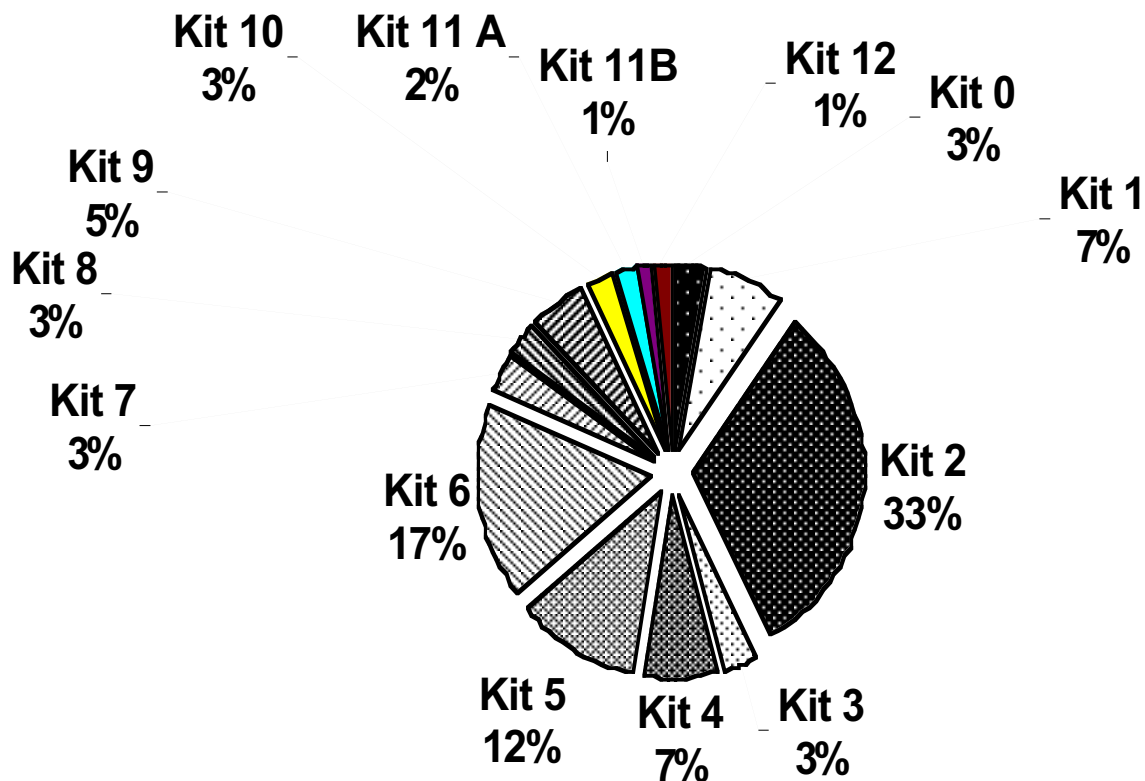
- 78% implemented at least one MISP component in the emergency. Of these;
- 68% implemented ALL components at SOME TIME during emergency ( $3/4 \leq 3$  months)
- 100% addressed Prevention of Excess Neonatal and Maternal Morbidity and Mortality
- Ensuring Safe Blood Supplies least often addressed (41%)

# Reproductive Health Kits

- Material resources to implement the MISRP
- For use in an emergency
- 12 kits, each addressing a component of reproductive health
- Designed for a specific number of people for 3 months
- Created by the IAWG in 1998, managed by UNFPA
- First evaluation in 1999, followed by revision of logistics and contents

# Results Component 4:

RH Kits ordered in 2000, 2001, 2002

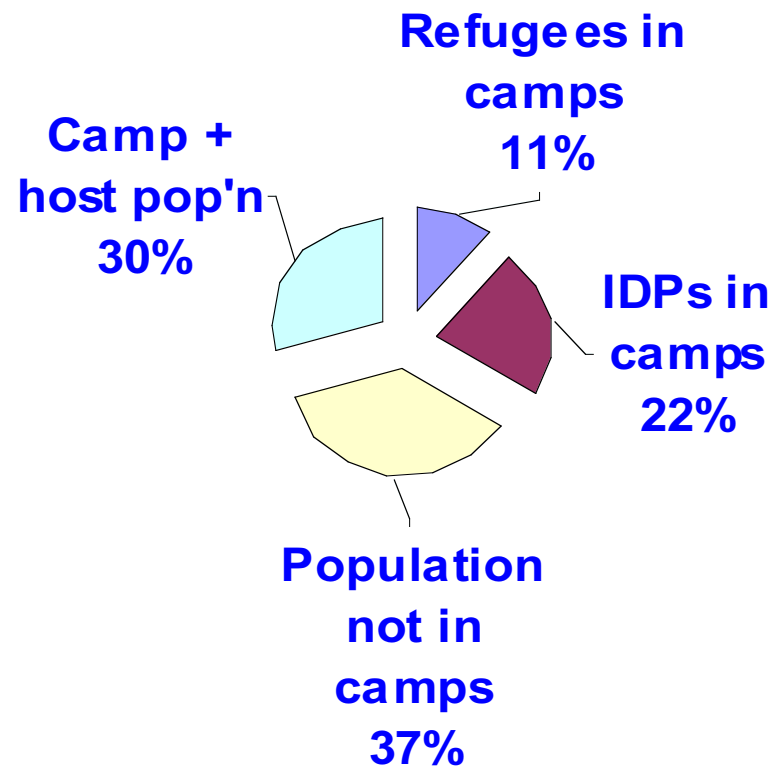


# Results Component 4:

## RH Kits Logistics

- 40% encountered problems with in-country transport and storage
- In 41% of shipments the cold-chain was not respected!
- In-country distribution > 1month for 74%,
- 7% completed distribution within 2 weeks

# Results Component 4: RH kits Beneficiary Populations



# Results Component 4: Training and monitoring

- 74% no prior training on MISIP and RH Kits
  - 45% organized training for others
- 26% did receive training
  - 99% organized training for others
- TBA and CHW most often trained, followed by Midwives
- 76% monitor use of RH kits

# Results Component 4:

## RH Kits Contents

- Most respondents satisfied with usefulness of materials. Some comments:
  - RH kits are expensive
  - Add a penis model to the condom kit
  - Have choice for smaller condoms
  - Add PEP to post-rape kit
  - Add pain killers to the abortion complications kit

# Component 4

## Conclusions and Recommendations

- Timely and complete MISP implementation improved, but
  - Obstetric emergency referral systems need strengthening
  - Reinforce HIV prevention through safe blood supplies and universal precautions
- In-country conditions may be a serious challenge to effective RH kit logistics: be prepared!
- Those who have been trained, train...
- Multi-lingual training courses and IEC materials