

Thinking Ahead about RH

Contingency Planning and Emergency Preparedness for Conflict Situations

UNFPA Experiences in Iraq and W Africa
2003

UNFPA should:

- **Ensure that reproductive health, including HIV prevention, is part of the humanitarian response**
- **Provide technical support for population data collection and analysis**
- **Advocate for gender concerns and for the most vulnerable**
- **Collaborate with UNCT, NGO partners and gov't on contingency, security and humanitarian response planning**

Planning for RH in conflict contexts: UNFPA experiences in 2003

Iraq war:

Design of contingency plans

Emergency preparedness

Regional capacity building

Reorientation of strategies

???

West African crisis:

Analysis of RH implications of regional conflict and displacement

Design of regional strategy, building on local lessons learned

Strengthening of cross-border initiatives

Planning Context: Iraq

- Existing programme with gov't and FPA; small office in Baghdad; not participant in OFFP but OFFP constraints on supplies
- Stronger technical and logistics capacities in Turkey, Syria, Jordan, Iran – staff with experience with emergencies
- Time to prepare, train and deploy supplies

Planning process: Iraq

- **2002: monitoring; UNCT preparedness process begins**
- **End 2002: predeployment of RH supplies inside Iraq; strengthening of neighboring field offices' logistics capacities**
- **January 2003: regional planning meeting in Amman to review assumptions and establish contingency plans (humanitarian response and security)**



Prewar Preparations: Iraq

- ✓ **Deployment of RH kits and supplies to neighboring countries**
- ✓ **Prewar humanitarian planning mission to Baghdad; identification/discussion with local partners**
- ✓ **Emergency RH Training of counterparts in Jordan, Syria, Turkey**
- ✓ **Establishment and staffing of suboffice in Kermanshah**
- ✓ **Deployment of RH advisor to Larnaca UN Hub; further id of partnerships**

Crisis period response:Iraq

Things that worked well

- ✓ **Regional readiness for refugee movements**
- ✓ **Basic provision of supplies; internal and cross-border**
- ✓ **General awareness of RH in emergencies among counterparts**

Things that didn't

- **Little refugee movement**
- **Limited access for monitoring dist. inside Iraq**
- **Severe security constraints for local staff**
- **Partnerships???**
- **CPA politicization of RH**

Lessons learned: Iraq

- **Effective planning takes time, human resources and requires thinking through all contingencies; regional perspective is critical**
- **Preparedness is costly – but donors were not prepared to support costs; shows need for advocacy**
- **UN agencies' ability to act was constrained by both security concerns and larger political context; need for heavy investment in local partners**
- **UNFPA was particularly handicapped due to (1) lack of donor response and (2) US policy context/CPA**

Planning a Regional Strategy for Humanitarian Response: West Africa

- Review of Humanitarian Activities at Country Level
- Akosombo Planning Meeting for Development of Country and Regional Level Action Plans
- Implementation and Adaptation

Regional Planning Meeting Akosombo – May 2003

Why?

- To share info and lessons learned
- To est. stronger links between countries
- To design regional initiative and strengthen local activities
- To ensure stronger HQ support to field

Who?

- UNFPA staff – 7 countries, HQ, CST
- OCHA
- Partner agencies
- Technical experts
- Marcel Desalay

Working Group Task 1

Make a Menu

Define country priorities through:

ID of major RH, SGBV, data concerns

ID of target populations

ID of possible contingencies

and then:

Identify possible activity areas for each population group*

Review of Political/Security Context

- **Crisis of 19 September 2002**
 - **Attempted Military Coup d'Etat and armed rebellion**
 - **Partition of the country: west and north occupied by rebels**
 - **Massive displacement of populations**
 - **Disintegration of public services**
 - **French military intervention**

Review of Humanitarian Situation

- **80% health facilities closed/ZO**
- **87 % of health personnel have left their posts/ZO**
- **Saturation/overdemand on social services in government controlled areas**
- **2.8 million persons affected**
- **750 000 IDPs, of whom 25% are women and 50% children and adolescents**
- **35 000 refugees**
- **Displaced have settled in host families and communities, not in relief camps**

Review of Reproductive Health Implications

Violence, displacement and loss of access to basic services have led to:

- ↑ Unassisted deliveries**
- ↑ Spontaneous abortion/miscarriage**
- ↑ STI (72% of displaced women seen in gynecological consultations)**
- ↑ Sexual violence and exploitation**
- ↑ Unprotected sexual contact (military, youth, CSWs, survival sex)**

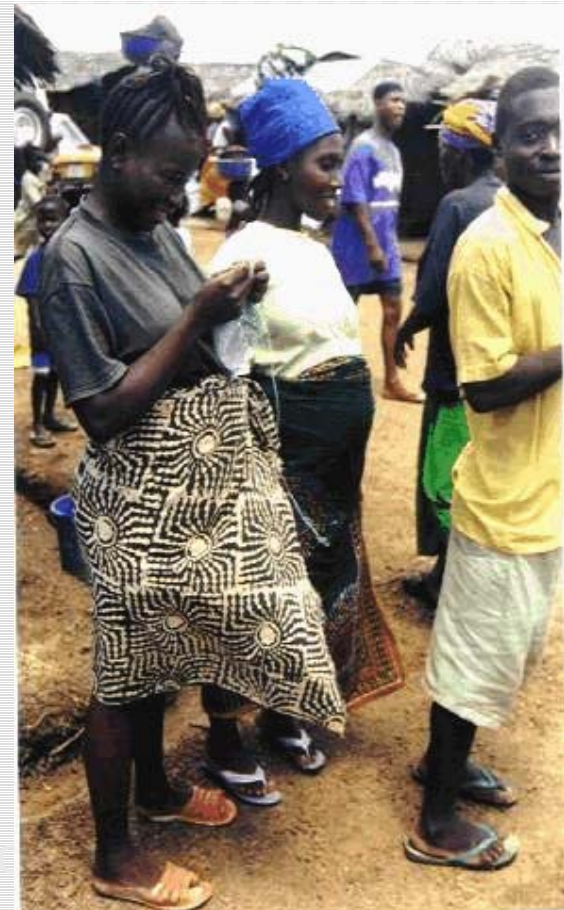
Mapping of Displacement and Damage to Facilities; Analysis of RH service access



Identification of RH concerns among target populations

Problems of young people:

- Lack of schooling or employment
- Lack of basic health information
- Sexual relationships at very early age
- High levels of teen pregnancy
- High levels of unsafe abortion
- High levels of STIs
- High risk of HIV transmission
- Depression & mental health problems
- High levels of drug and alcohol use



Working Group Task 2

Study the Menu

- **Analyse programme opportunities and constraints, including FO assets and vulnerabilities***
- **Identify possible actions to overcome constraints***

Review of programme constraints

Institutional:

- Lack of visibility of UNFPA in humanitarian situations
- Lack of preparedness of the FO for emergency response
- Lack of staff/insufficient logistics and transport resources

Programmatic:

- Reticence of gov't partners to reorient activities

Financial:

- Poor donor response to CAP
- Limited resources from CP and HQ

Working Group Task 3:

Think about what you had for breakfast

- **Review existing initiatives and partnerships**
- **Assess opportunities for expansion or intensification of existing activities**

Liberia

In Liberia, a UNFPA/Red Cross project for adolescent IDPS...

has helped them find some balance in their young lives...



Women in Crisis Movement

In Freetown, the “Women in Crisis Movement”

works with destitute women, most of whom have been sexually exploited during the war or have been forced into survival sex due to poverty and lack of skills



Hundreds of young women have received

- RH education and services
- Livelihood training
- Literacy training
- Spiritual support
- Civics training
- Micro-credit
- Job creation



In Guinea, UNHCR/UNFPA RH partnership for refugees has had results...

Together, UNFPA and UNHCR:

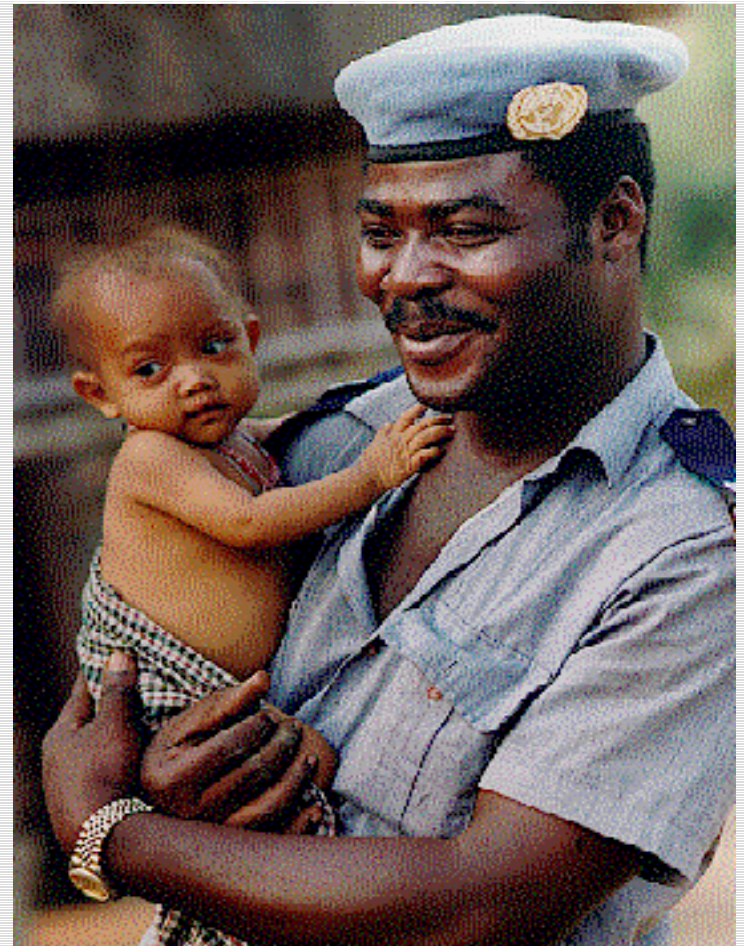
- ✓ Surveyed the health and protection needs of refugees
- ✓ Procured and distributed medicines and supplies
- ✓ Trained local and refugee health workers in RH skills
- ✓ Monitored reproductive health status of refugees
- ✓ Documented changes in health status and services
- ✓ Initiated sexual and gender-base violence prevention

Results?

- ✓ Documented improvements in use of antenatal care
- ✓ Better delivery outcomes
- ✓ Increased use of family planning
- ✓ Decline in sexually transmitted infections

In SL, working on HIV prevention and gender awareness with PK forces, police and military has included:

- **Support for DPKO HIV AND Gender focal points**
- **Technical assistance and training**
- **Support for KAPB surveys**
- **Guidance on use/provision of condoms,STI drugs, and HIV testing kits; Forecasting and procurement support**
- **IEC materials for radio programming**



Working Group Task 4

pick a dish

- **Identify two priority intervention areas and prepare an action plan* for implementation, including:**
 - ID of partnerships involved**
 - technical assistance requirements**
 - financial requirements**
 - commodity and logistics requirements**
 - human resource requirements**

Selection of HPA target groups/areas

Zones of Intervention

- Transit zones
- Occupied zones
- Zones of military cantonment

Target Populations

- Displaced persons and host communities
- Women of reproductive age (500 000)
- Others: military (25 000); adolescents (15 000); CSWs

Selection of intervention area(s) and activities

Target population:

**THIRD COUNTRY
NATIONALS
transitting on buses
to Burkina**

Intervention:

**Provision of basic
supplies for family
hygiene– “dignity
kits”**

**Partners: IOM, Ghanaian gov't, AYA beneficiaries
Financial needs: \$1 8,000**

Working Group Task 5

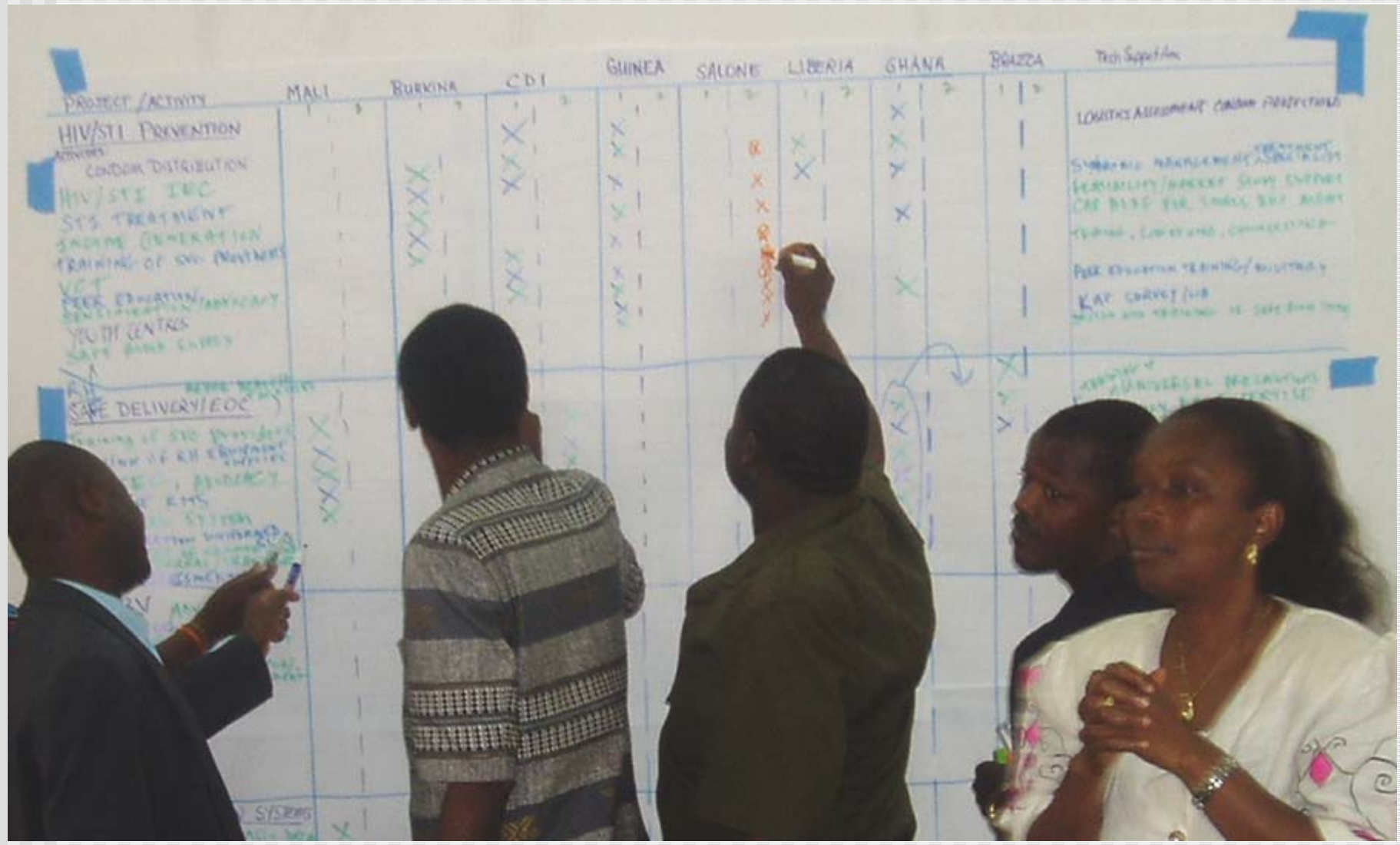
Tell your friends and neighbors

- **Consider what advocacy activities would best support your two interventions***
- **Identify technical support needed***
- **Identify material support needed***
- **Identify sources of support***

Working Group Task 6

Share your dessert with your neighbor

- **Identify one cross-border initiative that your FO could implement with another FO in the region***



Birth of a Regional Action Plan

- **Combination of country plans into a consolidated matrix**
- **Identification of “matching” activities and regional gaps**
- **Negotiation of shared activities and resources**
- **Consolidated resource plan**

Overall outcome:

- **Regional strategy and action plan with “building block” country plans...**

which include:

- human and financial resource requirements**
- staff security requirements**
- technical assistance and training needs**
- partnership arrangements**
- logistics requirements**
- advocacy plans**

BONUS: 2004 CAP projects designed