Ignite Stage Presentation
Celebrating Success of the Hyogo Framework of Action

“Integration of MISP into the Disaster Risk Reduction and Management SOPs and Action Plan of District and Provincial Government in Pakistan”
Overview of SPRINT

Sexual and Reproductive Health Programme in Crisis and Post-Crisis Situations

- Addresses all stages of the emergency management cycle.
- Ensures timely access for crisis affected populations to life-saving sexual and reproductive health services as outlined in the Minimum Initial Services Package (MISP).
- Creates enabling environment through advocacy with key stakeholders to put in place measures for disaster risk reduction. Establishes mechanisms to build country capacities for emergency preparedness.
**GOAL:** To increase timely access for crisis affected populations to life-saving sexual and reproductive health services as outlined in the MISP

**DRR - Enabling Environment**
Objective: The policy and funding environment is increasingly supportive of SRH in crisis settings

**Preparedness-Capacity Development**
Objective: Increased national capacity to coordinate the implementation of the MISP in humanitarian settings

**Emergency Response**
Objective: Country Coordination Team able to respond effectively in a timely manner during a crisis

**SPRINT Management and Organisation**
Objective: To deliver a well managed program, underpinned by robust internal systems, monitoring and evaluation and lessons learned
Pakistan is one of the most disaster prone countries in the world

*In 2014, 28 million people affected by Conflict and natural disasters*

*3 million in 2014 forced to flee their homes due to constant Conflict*
- 22% of people live in extreme poverty: they survive on less than $1.25 (US) per day
- 25th highest infant mortality rate in the world
- 2/3rd of pregnant women do not have access to antenatal care, and only 39% of births are attended by a skilled birth attendant.
The SPRINT Initiative in Pakistan and its Member Association Rahnuma- Family Planning Association of Pakistan (FPAP) have been proactive in advocating for SRHR and MISP inclusion into the Disaster Risk Reduction and Management plans at national and local levels.

Under Disaster Risk Reduction (Enabling Environment): Advocacy strategies through Trainings, Workshops and Meetings were designed for inclusion of MISP into the DRR policies and plans at national and local level.
The Strategies for inclusion of MISP:

- (Emergency Preparedness) MISP Trainings especially for the Government officials of National and Local level government
- Effective Dialogue sharing with the Government officials: meetings/sensitization workshops etc.
- Emergency Response and sharing the findings with the SPRINT Reproductive Health Working Group: which includes representatives from Government and various Civil Society partners.
ADDRESSING THE PROBLEM

- Government Representatives and Officials from Civil Society organizations are part of the SPRINT Reproductive Health Working Group

- Advocacy and orientation on MISP/SRH during crises

- MISP Trainings: Building capacities
Results

Constant advocacy with the national and local level governments have led to **INTEGRATION** of MISP and SRH into the NDMA and PDMA action plans and SOPs in Gilgit Baltistan (GB), Punjab, Baluchistan, Sindh, FATA, Khyber Pakhtunkhwa (KPK) and Azad Jammu Kashmir.
Results

- Ownership of Government and other civil society organization with regards to RHWG and implementation of MISP during emergencies.

- High Demand for training on MISP and SRH during crises in the country
Challenges

- Entry into the government structure and systems can delay the efforts due to rigid bureaucratic processes.
- Turnover/ Transfer of representatives trained on MISP both civil societies and government officials.
- Rigid Societal Structure and cultural norms.
Measuring Success

The Rapid Assessment done by SPRINT highlights:

- High Level of knowledge among the Government officials on MISP and SRH especially in FATA/ Punjab/ Sindh and Baluchistan Region.
- Demand for further trainings on MISP and SRH as tool for preparedness and Risk Reduction.
- Willingness of other Government institutions especially Academic institutions to include MISP into the curriculum of doctors and nurses to prepare them to respond to crises and provide SRH services.
RELEVANCE TO HYOGO FRAMEWORK OF ACTION

- Ensuring that disaster risk reduction (DRR) is a national and a local priority with a strong institutional basis for Implementation along with this building & strengthening capacities on MISP and ensure maximum collaboration between partners on Emergency Preparedness. (Priority: 1 & 5)

- SPRINT through its advocacy efforts ensures participation of local and national governments along with various stakeholders in integrating Sexual and Reproductive Health into DRR plans and policies.
Training of various partners especially national and local level government officials to strengthen their understanding of MISP is core in terms of ensuring emergency preparedness.
Access to Sexual and Reproductive Health during crises is not a luxury; it is a basic human right.
THANK YOU