

# Ignite Stage Presentation Celebrating Success of the Hyogo Framework of Action

**sprint**

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

**Australian  
Aid** 



*“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.

**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



**GOAL:** To increase timely access for crisis affected populations to life-saving sexual and reproductive health services as outlined in the MISP

**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



# CONTEXT

- 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
- 25<sup>th</sup> highest infant mortality rate in the world
- 2/3<sup>rd</sup> of pregnant women do not have access to antenatal care, and only 39% of births are attended by a skilled birth attendant.



# ADDRESSING THE PROBLEM

- The SPRINT Initiative in Pakistan and its Member Association Rahnuma- Family Planning Association of Pakistan (FPAP) have been proactive in advocating for SRHR and MISIP 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 MISIP into the DRR policies and plans at national and local level.

# ADDRESSING THE PROBLEM

## ■ 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.

# RELEVANCE TO HYOGO FRAMEWORK OF ACTION

- 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  
basic human  
right**





# THANK YOU

