

Ignite Stage Presentation
Celebrating Success of the Hyogo Framework of Action
Implementing the MISP for Reproductive Health
in the Aftermath of the Zamboanga City Crisis

sprint

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

**Australian
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WHAT IS THE SPRINT INITIATIVE?

- The SPRINT Initiative is a Sexual and Reproductive Health (SRH) Programme in Crisis and Post-Crisis Situations.
- SPRINT works to ensure access to essential lifesaving SRH services for women, men and children in times of crises, a time when services are most needed yet are not prioritized or recognized by key humanitarian responders
- A global programme which focuses on facilitating and supporting advocacy, training, coordination, and service delivery related to sexual and reproductive health (SRH) in humanitarian settings

WHAT IS SPRINT'S GOAL?

- To help crisis affected populations by:
 - Reducing preventable SRH morbidity and mortality
 - Increasing timely access to SRH services as outlined in the MISP



HOW DO WE INCORPORATE THE HYOGO FRAMEWORK INTO OUR PRACTICE?

1. Disaster Risk Reduction
 - Enabling Environment
2. Preparedness
 - Capacity Development
3. Emergency Response
 - Implementation of the Minimum Initial Services Package for Reproductive Health (MISP)

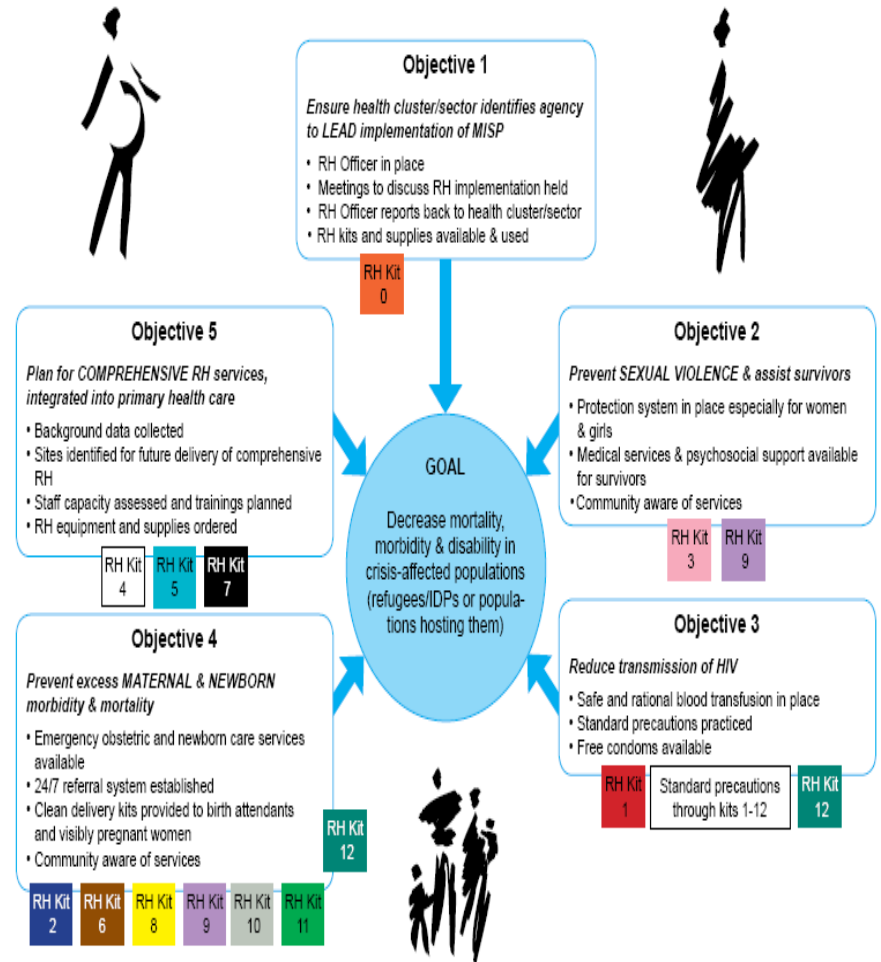


HOW DO WE RESPOND?

Implement the MISP

- 1) Coordinate/Identify RH Lead
- 2) Prevent and manage the consequences of sexual violence
- 3) Reduce HIV transmission
- 4) Prevent excess maternal and neonatal mortality and morbidity
- 5) Plan for comprehensive RH services

Minimum Initial Service Package (MISP) for Reproductive Health



CONTEXT- ZAMBOANGA CITY, PHILIPPINES

- On 9 September 2013, fighting broke out in coastal villages of Zamboanga city between a faction of the Moro National Liberation Front and the Armed Forces of the Philippines which spread to the nearby island province of Basilan.
- Sexual and Reproductive Health (SRH) needs continue and increase during crises.
 - *The risk of sexual violence may increase during social instability.*
 - *STI/HIV transmission may increase in areas of high population density.*
 - *The lack of family planning services increases risks associated with unwanted pregnancies.*
 - *Childbirths also incur higher risks in conflict crises. Lack of access to emergency obstetric care increases the risk of maternal deaths.*



ADDRESSING THE PROBLEM

- SPRINT provided an Emergency Response grant of \$50,000 to the Family Planning Organization of the Philippines (FPOP)
- To implement the MISP over 3 months (Oct-Dec 2013)

- *FPOP submitted their proposal to provide potentially lifesaving SRH information and services to people sheltering in the “Grandstand”*

(Joaquin F. Enriquez, Jr. Sports Complex), the largest evacuation center, and other designated centers.



ADDRESSING THE PROBLEM

Project Activities included:

- Reproductive Health Medical Missions (RHMMs) for SRH service provision,
 - Distribution Missions (DMs) for provision of RH Kits (clean delivery kits, dignity kits, hygiene kits),
 - Health Information Sessions (HIS) for information and sensitization on a range of SRH topics and services.
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- Coordination of reproductive health in the project area
 - Planning for comprehensive reproductive health services through baseline data gathering and documentation of services provided



ADDRESSING THE PROBLEM

Philippine Reproductive Health Working Group

- *Philippines Department of Health (DOH),*
- *FPOP*
- *UNFPA*
- *Philippine Red Cross*

Local Implementing partners included:

- *Philippines Department of Health (DOH),*
- *Department of Social Welfare and Development (DSWD)*
- *Mindanao Emergency Response Network*
- *Police and Security forces*



ADDRESSING THE PROBLEM

- *Cooperation of local organizations and officials plus the aid of external groups and government agencies facilitated implementation of the project.*
- *There was sufficient support in terms of provision of information, data and resources.*
- *The team saw that the project could have benefitted from tighter coordination between and among the agencies involved.*



ADDRESSING THE PROBLEM

- 30 youth volunteers were recruited and trained to assist with project activities.
- These youths were oriented on the MISPP and project implementation
- Formed a strategic part of capacity and implementation



ADDRESSING THE PROBLEM

- *“I take every response as an opportunity to educate people and to upgrade them in the next response so that we will have new blood coming in.”*



CHALLENGES

- Difficulty in completing list of IDPs
- Shipping of supplies for the medical missions delayed by typhoons
- Priority given towards arms and ammunition when aid from Arm Forces was needed
- Security threat to team in conflict area led to refocus to certain evacuation centers
- Medical teams were sometimes kept indoors due to shootings



RESULTS AND IMPACT

- At the close of the project, a total of 3,159 people had been provided with SRH assistance, including
- 638 pregnant women
- 520 lactating women
- 2,001 women of reproductive age
- served through 10 reproductive Health Medical Missions across 13 evacuation centres.



RESULTS AND IMPACT

These missions provided

- 539 family planning services
- 1,846 maternal and neonatal health services
- 9,657 male condoms
- 2,606 blue kits (**Hygiene Kit**) were given to women of reproductive age
- 518 black kits (**Clean Delivery Kit**) to pregnant women
- 266 orange kits (**Dignity Kit**) to lactating women
- The overall impact on the community was the increased timely access to life saving SRH services.



MEASURING SUCCESS

SPRINT developed a standardized Post-Emergency Review Protocol and Tool

Data collection methods included

- *documentation of quantitative performance indicators (including service statistics),*
- *semi-structured interviews with FPOP staff,*
- *focus groups with coordination partners, SPRINT staff members, and project beneficiaries.*

Key recommendations post review included:

- *Extend the Reach of MISP Training for Response Staff within Partner Agencies*
- *SPRINT Resource Mobilization for Medical Equipment for FPOP Medical Mission*
- *Preposition Clean Delivery Kits (Kit 2A) at the FPOP National Office*

RELEVANCE TO THE HYOGO FRAMEWORK FOR ACTION

Priority #1

Ensure that disaster risk reduction (DRR) is a national and a local priority with a strong institutional basis for implementation

Priority #5

Strengthen disaster preparedness for effective response at all levels.

- *SPRINT works to build an enabling environment so that policy and funding is increasingly supportive for SRH in crises and strengthens county coordination teams (eg the Philippines Reproductive Health Working Group) to respond effectively during a crisis*
- *Capacity building with training on the MISP and RH commodities incorporates risk reduction into emergency preparedness. The results have institutionalized HFA principles into SRH programming in the 6 priority countries of SPRINT, including the Philippines.*



Implementation of the MISP is not optional.

It is an international standard of care that should be implemented at the onset of every crisis



THANK YOU!

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