



# EMERGENCIES

Providing supplies and support in crisis situations. An immediate humanitarian response reinforced by reconstruction.

More than 50 countries have received UNFPA support in emergencies since 1994. In 2003, UNFPA provided assistance in current crisis situations and to post-conflict reconstruction programmes in 34 countries: Afghanistan, Angola, Bosnia, Burundi, Chad, Colombia, Congo, Côte d'Ivoire, Democratic Republic of the Congo, Eritrea, Ecuador, Ethiopia, Ghana, Guinea, Indonesia, Iran, Iraq, Jordan, Liberia, Madagascar, Malawi, Occupied Palestinian Territory, Rwanda, Sierra Leone, Somalia, Sri Lanka, Sudan, Swaziland, Syria, Timor-Leste, Turkey, United Republic of Tanzania, Zambia and Zimbabwe.

Emergency reproductive health initiatives are carried out in cooperation with partners in governments, other UN agencies and local and international NGOs.

## EQUIPMENT AND SUPPLIES

In 2003, UNFPA dispatched emergency reproductive health kits valued at \$2.2 million to 30 countries and territories — a volume nearly double that of 2002, due in part to high demand preceding the conflict in Iraq and during the regional crisis in West Africa and southern Africa. Ready-to-ship kits are prepared to meet specific needs such as safe delivery, condoms to prevent HIV transmission and unwanted pregnancy, rape management, STI prevention and treatment, care after miscarriages and unsafe abortion, Caesarian section and blood transfusions.

- Fighting in Liberia contributed to maternal and infant mortality at levels not seen for decades. UNFPA provided emergency obstetric equipment, drugs and medical supplies to hospitals and clinics in and around Monrovia, many of which had been looted during heavy fighting.

- When a deadly earthquake struck Bam, Iran, in December 2003, UNFPA provided emergency funds to purchase medical equip-

ment and reproductive health supplies. UNFPA then worked with the Government and the Iran Family Planning Association to install sanitary facilities. The earthquake took the lives of more than 40,000 people, including over half of the city's health care personnel, and destroyed its three hospitals.

- UNFPA conducted a contingency planning exercise in Quito, Ecuador, to help the country office and its partners prepare an emergency response in the event of natural disasters or man-made crises.

## RECONSTRUCTION

Restoring and improving reproductive health services in the aftermath of an emergency, whether natural disaster or armed conflict, requires sustained humanitarian assistance.

- A modern hospital in Kabul was rebuilt and refurbished with support from the Government of Italy and UNFPA in a poor, densely populated area with a population of 1 million. Capacity doubled at the Khair Khana Hospital, which gained a clean delivery room and



In Afghanistan, UNFPA helped rebuild this school, which offers married women classes on the grounds of the Ministry of Women's Affairs.

Photo: William A. Ryan/UNFPA



Medical supplies being unloaded at the Al-Ruwaished Hospital in eastern Jordan to aid refugees from the conflict in Iraq.

Photo: Omar Gharzeddine/UNFPA

### Planning Ahead for Iraq and West Africa

Contingency planning in anticipation of the Iraq conflict was the most comprehensive ever undertaken by UNFPA. Supplies for pregnancy care and safe delivery were deployed in advance to Iran, Jordan, Syria and Turkey, with some additional supplies for the management of gender-based violence and prevention of STIs including HIV/AIDS.

In January 2003, UNFPA held an emergency preparedness workshop in Amman that produced a detailed response plan. In March, the Al-Ruwaished Hospital in eastern Jordan received a UNFPA shipment of emergency medical equipment, supplies and medications to aid refugees of the Iraqi conflict. In May, UNFPA sent much-needed supplies to the northern Iraqi city of Mosul and in June shipped many more supplies to Baghdad for distribution to health centres. Also in June, UNFPA and several partners conducted an emergency assessment of 18 hospitals and 30 primary health care centres around Baghdad providing reproductive health and family planning services.

This approach to contingency planning — from data collection to estimates of required supplies to forging new partnerships for an effective response — was undertaken in 2003 not only for Iraq but also for West Africa. The advent of crisis in Côte d'Ivoire and intensified conflict in Liberia demanded a regional response that addressed constant population movements. In May 2003, UNFPA held a workshop in Ghana with staff from offices in Burkina Faso, Côte d'Ivoire, Ghana, Liberia, Mali and Sierra Leone. This planning facilitated an efficient UNFPA response later in the year when the crisis intensified in Liberia. UNFPA also supported reproductive health interventions within humanitarian response programmes in the Southern African region for Lesotho, Malawi, Swaziland and Zambia.

an up-to-date operating theatre for Caesarean sections.

- UNFPA continued to support the Women in Crisis project in Freetown, Sierra Leone, a local woman's effort to assist some 400 women and girls whose suffering during years of brutal civil war has often led them to risk HIV/AIDS by turning to commercial sex work for survival.

- In the Democratic Republic of the Congo and in Sierra Leone, UNFPA supported HIV prevention among members of the major United Nations peacekeeping contingents as well as women, refugees and the internally displaced. Similar activities were introduced in the Republic of Congo and Ethiopia. National demobilization programmes also received UNFPA support for the reintegration of adolescent ex-combatants into community life.

- In Kosovo, Serbia and Montenegro, UNFPA developed a strategic framework for a continued response to development challenges, based on lessons learned from years of humanitarian response.

- In Burundi, UNFPA continued cooperation with Cordaid, a Dutch Catholic relief group, to improve the quality of maternity care and other reproductive health services in existing health centres by training nurses and midwives and by providing supplies.

- UNFPA supported a Rwandan project to reduce poverty and promote reproductive health in the provinces of Cyangugu, Kibuye and Umutara. The project works with young people to overcome obstacles to generating income; advocates education reform to focus on literacy, appropriate technology and entrepreneurship; and encourages young people to adopt positive reproductive health behaviours, especially HIV prevention.

## DATA AND ANALYSIS

UNFPA conducted rapid reproductive health assessments and emergency and post-conflict programme evaluations in numerous countries. Data and analysis provide the foundation for planning programmes that meet people's needs.

- UNFPA developed a database of the displaced population in the Republic of Congo's Pool region for use as a baseline study for UN humanitarian programming.

- Internally displaced adolescents were the focus of an October 2003 meeting to review a set of seven country-level projects funded by the Belgian Government and implemented by UNFPA in Burundi, Colombia, the Democratic Republic of the Congo, Liberia, Occupied Palestine Territory, Rwanda and Sierra Leone. Baseline data was collected and assessed to determine the impact of forced migration on adolescents' access to reproductive health information and services.

- In Sierra Leone, UNFPA conducted a survey of knowledge, attitudes and behaviour to determine the level of awareness of HIV/AIDS among peacekeepers of the United Nations Mission in Sierra Leone (UNAMSIL).

## TRAINING AND EDUCATION

UNFPA supports counselling, education and training activities that help vulnerable populations gain access to services they need to protect themselves from unwanted pregnancy, gender violence, HIV/AIDS and other STIs.

- In 2003, UNFPA supported training on a reproductive health response to emergencies in partnership with the Women's Commission for Refugee Women and Children, the International Refugee Committee (IRC) and Columbia University.

- Counselling for newly arrived refugees in Meheba, northwest Zambia, is one aspect of the reproductive health services provided by the Young Men's Christian Association (YMCA), with support from UNFPA since 1999. Meheba is home to more than 50,000 refugees, mainly from Angola and the Democratic Republic of the Congo, with smaller numbers coming from Rwanda, Burundi and other countries in the region.

- To build capacity within UNFPA, staff attended workshops in New York in two key areas: sexual and gender-based violence in emergency settings, and how to implement the Minimum Initial Service Package (MISP) in the initial phase of a crisis. The MISP is a set of objectives and activities for achieving certain minimum requirements in an emergency situation.

## ADVOCACY AND AWARENESS-RAISING

In addition to direct assistance, UNFPA ensures that issues of reproductive health, gender and population are included in the humanitarian and rehabilitation-oriented efforts of the international community, local authorities and civil society.

- In October 2003, UNFPA and WHO co-sponsored a meeting of the Inter-Agency Working Group on Reproductive Health in Emergency Situations (IAWG), which includes 50 humanitarian partners from UN agencies, NGOs and academic institutions.

- In 2003, UNFPA introduced "Frontlines: News from the Field," an electronic newsletter highlighting humanitarian responses.