

# UNFPA IN PAKISTAN

## Reaching to those most in need in the Flood Affected Districts

### BACKGROUND

According to the latest United Nations reports, approximately 17.2 million people have been affected by the recent floods in Pakistan, of which 70% are women and children. These figures are expected to rise as the disaster evolves revealing the full extent of the damage and displacement. The provinces of Sindh, Khyber Pakhtoon Khwa (KPK) and Punjab (with more than 3.6, 4.3 and 8.2 million people affected, respectively) are the worst affected areas; however, the flooding has severely affected several other regions, such as Baluchistan province (672,171 affected people), the Federally Administered Tribal Areas (FATA), Gilgit Baltistan (8,561 affected people) and Azad Jammu and Kashmir (245,000 affected population). These displacements have put the most vulnerable populations at greater risk, particularly pregnant women who already face a severe lack of access to prenatal care, assisted delivery and emergency obstetric care. Insecurity due to the chaos of the crisis places the most vulnerable at risk, many of who are unable to access supplies and in some cases they are at risk of violence.

### SCALE OF THE CRISIS

Number of people affected: 17.2 million (numbers may escalate as assessments are finalized in coming days)  
 Number needing immediate humanitarian assistance: 6 million  
 Number of women of reproductive age: 1.5 million  
 Number expected to deliver in the next 3 months: 52,500  
 Newborns needing care in next three months: 52,995  
 Number of pregnancy-related surgeries expected in next 3 months: 9,225



### UNFPA'S EMERGENCY RESPONSE:

UNFPA has been on the frontlines of the coordinated UN emergency response to the flooding in Pakistan. The special needs of women and girls must be met. Even in emergencies, women continue to give birth and require timely medical care to ensure a safe delivery. UNFPA has been providing emergency reproductive health services to the affected communities. In addition to medical services, health professionals are equipped to support women and children who have experienced violence and to prevent the spread of sexually transmitted infections.

The Fund continues to work closely with federal, provincial, and district authorities, as well as NGOs, to provide life-saving reproductive health services to the flood affected districts of Sindh (Jacobabad, Thatha, Sukkur, Shikarpur, Ghotki, Kashmore, Larkana, Khairpur), KPK (Nowshera, Charsadda, Swat, D.I.Khan, Tank, Lower Dir and Kohat) and Punjab (Muzaffargarh). As part of the current Pakistan Initial Floods Emergency Response Plan, (launched on 12 August 2010) UNFPA is requesting US \$6,050,000 million to provide comprehensive maternal, neonatal and child health care services, as well as basic hygiene supplies and psychosocial support services. This assistance, to both the affected districts and the nearby medical facilities is anticipated through the end of 2010. UNFPA is also requesting \$300,000 to respond to gender needs with a particular focus on gender-based violence. The Pakistan Initial Floods Emergency Response Plan is currently under revision to reflect the dynamic situation and the steadily increasing needs of the population. Under the revised response plan, UNFPA will be requesting additional funds to support the expected rise in maternal health and gender needs.



**UNFPA’s Reproductive Health interventions include:**

- Together with WHO and UNICEF, UNFPA is participating in the National Steering Committee on the Health Response to the Floods. This committee, chaired by the Prime Minister, has ensured that reproductive health is mainstreamed throughout the response.
- Under the Health Cluster, UNFPA is co-chairing the RH task force with the Ministry of Health, which is a newly formed Task Force to coordinate specific sexual and reproductive health efforts and ensure that MISP<sup>1</sup> services are provided to flood affected areas.
- Health care providers working at UNFPA service delivery points (SDPs) have served more than 900,000 displaced people since the floods began.
- UNFPA, through implementing partners, has conducted various assessments on maternal, neonatal, and child health, and has subsequently established labor rooms at selected service delivery points (SDPs).
- Currently, UNFPA has established 36 fully-equipped Service Delivery Points, which include 23 Mobile Service Units (MSUs) and 13 existing government health facilities (12 basic and one referral level facility). These SDPs are located in the three provinces of Sindh (including the districts of Jacobabad, Thatha, Sukkur, Shikarpur, Larkana, Ghotki, Khairpur and Kashmore), KPK (including the districts of Nowshera, Charsada, Swat, Lower Dir, D.I.Khan, Tank, and Kohat) and in Punjab (including the districts of Muzaffargarh) to provide emergency reproductive health services and emergency obstetric care. The SDPs are fully equipped with trained personnel, equipment, medicine and RH supplies.
- As part of an AusAID in-kind contribution, UNFPA has distributed 1,960 clean delivery kits through the MNCH programme in one of the most flood affected districts in Sindh province (including Baluchistan).
- UNFPA has provided emergency reproductive health kits<sup>2</sup> (RH kits) containing various medical instruments, medicines and supplies (including supplies for the treatment of STIs and to respond to GBV) to each Service

<sup>1</sup> **The Minimum Initial Service Package (MISP) for Reproductive Health (RH) in Crisis Situations** is a coordinated set of priority activities designed to: prevent and manage the consequences of sexual violence; reduce HIV transmission; prevent excess maternal and neonatal mortality and morbidity; and plan for comprehensive RH services in the early days and weeks of an emergency. The MISP distance learning module aims to increase humanitarian actors' knowledge of these priority RH services to initiate at the onset of a crisis situation.

<sup>2</sup> **Emergency reproductive health kits** are an integral part of MISP implementation. The kits are consolidated sets of supplies used to provide appropriate reproductive health services in humanitarian and refugee situations. There are currently 12 kits ranging from contraceptives and minimalistic clean delivery kits to sophisticated medical equipment used in the provision of emergency obstetric surgery.

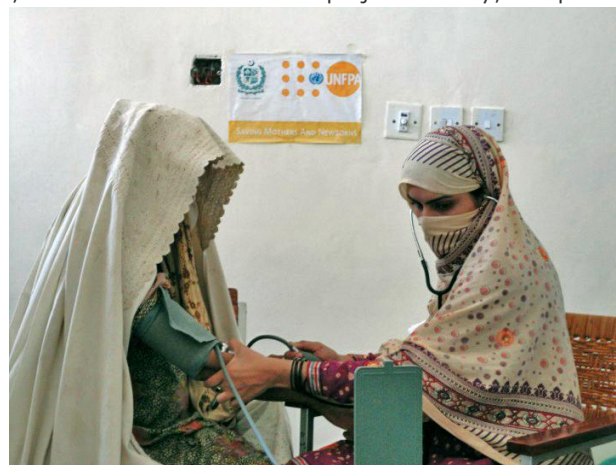
Delivery Point and various health facilities and hospitals in the flood affected areas. UNFPA procured US \$700,000 worth of RH kits from Copenhagen (targeting needs of 6 million people for 2 months) to support the Ministry of Health and NGOs in responding to needs at the community level, as well as at basic and referral level health facilities. More RH kits will be made available in the coming weeks.

- The Fund will strengthen more basic and referral level health facilities to deal with increased demand for medical services all over Pakistan.
- To serve the specific needs of displaced women and their newborns, UNFPA has distributed hygiene kits to 3,300 families, as well as 1,800 newborn kits. An additional supply of women’s hygiene kits to cover the needs of 50,000 families and 50,000 newborn kits, are currently being prepared for distribution. These kits, used by both women and their families, include cotton rolls, gauze, a piece of cloth, soap, polythene bags, washing powder, towels, plastic comb, nail clippers, prickly heat powder, mosquito repellent body lotion, and a small carry-bag.
- Additional support is urgently required to scale up life-saving health interventions in affected areas. UNFPA has reported challenges in recruiting adequate numbers of female health care providers (especially gynecologists) in flood-affected districts.

**UNFPA’s Coordination of GBV prevention and response:**

UNFPA is responsible for addressing the protection and psychosocial issues of displaced women and girls. As co-chair of the GBV Area of Responsibility under the Protection Cluster, UNFPA is coordinating to ensure that assessments identify risks and vulnerabilities of women and girls to gender-based violence. UNFPA and UNIFEM are also the co-conveners of the Gender Task Force in Pakistan. Through collaboration with OCHA, UNIFEM and UNICEF, UNFPA and NGO partners will:

- Coordinate a multi-sectoral and inter-agency prevention and response programme to include referral and reporting mechanisms, information sharing, coordination and monitoring/evaluation, with particular focus on health sector response to GBV.
- Provide emergency Reproductive Health supplies to health facilities and ensure trained providers can attend to needs of survivors of violence.
- Undertake a rapid assessment of the victims of GBV, including children and women in need of psychosocial and other support.
- Develop and disseminate key messages throughout the humanitarian community on effective prevention strategies to ensure that assistance does not compound existing risks and vulnerabilities.
- Design specific priority interventions including plans for their implementation, coordination, monitoring and evaluation.
- Plan psychosocial support to the victims of GBV, including children and women.
- Collect information; identify problems and constraints, in order to ensure effective project delivery; and provide training and/or briefing, as required.
- Ensure that reporting and advocacy on issues related to GBV among the flood affected areas and returning populations takes into account WHO’s Ethical and Safety Recommendations for Researching, Documenting and Monitoring Sexual Violence in Emergencies, and IASC guidance on gender mainstreaming, gender equality programming and GBV prevention and response.





**Project proposed under the current Pakistan Initial Floods Emergency Response Plan**

UNFPA has had considerable experience meeting the reproductive health needs of communities prior to the recent flooding in Pakistan. Nonetheless, substantial support is needed from donors to help UNFPA and its partners meet the vast humanitarian needs of the displaced population. Recent assessments reveal that in order to provide urgent, quality services, **USD 6,050,300** is needed. Details of the projects are described below.

**Reproductive Health**

Agency	United Nations Population Fund (UNFPA)
Project Title	Provision of emergency reproductive health services with a special focus on maternal newborn and child health in flood affected areas of Sindh, Punjab and KPK provinces
Project Code	PKA-FL-10/H/34137/R
Sector	Health
Objective	To prevent excess maternal mortality and morbidity, and reduce transmission of HIV through implementation of Minimum Initial Service Package (MISP) for Reproductive Health in Crisis Settings
Targeted Beneficiaries	Out of total 6 million targeted population, there are approximately 1.5 million women of reproductive age, 45,360 pregnant women, 52,995 newborns, 52,500 deliveries and 9,225 women with pregnancy related complications in the next 3 months
Implementing Partners	MNCH-MOH, Ministry of Population Welfare, INGOs, local NGOs
Project Duration	Aug 2010 - Oct 2010
<b>Funds Requested</b>	<b>US\$ 6,050,000</b>

**Protection (Proposed Project)**

Agency	United Nations Population Fund (UNFPA)
Project Title	Addressing GBV and responding to Gender needs in the flood affected districts of Sindh and Punjab
Project Code	
Sector	Protection
Objectives	To minimize the risks and vulnerabilities of flood affected women, girls, boys and elderly, to prevent and respond to GBV (Gender Based Violence) in the flood affected areas of Sindh and Punjab
Targeted Beneficiaries	Total: 6,000,000 targeted population including approximately 1,500,000 women of reproductive age, 45,360 pregnant women and 52,995 newborns
Implementing Partners	Ministry of Women Development, Ministry of Health, INGOs, NGOs
Project Duration	Aug 2010 - Dec 2010
<b>Funds Requested</b>	<b>\$300,000 in the initial response plan</b>