



Providing Humanitarian Aid

During conflicts, natural disasters and other emergencies, reproductive health is often overlooked. In crisis situations, one in five women of childbearing age is likely to be pregnant. Without access to health services and medicines, women and babies face an increased risk of life-threatening complications. Many women also lose access to family planning supplies, exposing them to unwanted pregnancies in perilous conditions.

UNFPA Supplies provides reproductive health kits, dignity kits, trains national staff to provide RH care in emergencies, and deploys UNFPA experts to support.

Building on UNFPA partnerships with governments, community-based organizations and other UN agencies, UNFPA Supplies is continuously working to ensure that reproductive health and contraceptive access is integrated into emergency responses.

Youth often represent a large proportion of those affected by crises. Half of the world's out-of-school children live in conflict or post-conflict countries. Displaced young people are particularly vulnerable during times of crisis, and they urgently need access to health education and services to protect themselves from disease and unintended pregnancies.

Key Facts & Figures





PROVIDING CONTRACEPTIVE ACCESS

In 2015, 1.4 million women and girls were reached with reproductive health kits and services through UNFPA Supplies.



PREGNANCY-RELATED COMPLICATIONS

In 2015, about 99 per cent of maternal deaths took place in developing regions, with sub-Saharan Africa accounting for about 66 per cent of deaths, and Southern Asia accounting for 21 per cent.

In 2015, 61 per cent of all maternal deaths took place in 35 countries that are affected by humanitarian crises or fragile conditions.





WORK IN ACTION

After the earthquake in Nepal in April 2015, UNFPA partnered with the Ministry of Health and NGOs to distribute emergency reproductive health kits to the population in need. The kits contained supplies for HIV prevention, rape management, safe childbirth including caesarean section, family planning services, miscarriage management, and prevention and treatment of sexually transmitted infections

"My father had 18 wives, and my mother was the second to last one... Because we were a big family, we always lacked the basics in life, especially school needs... That is one of the reasons I decided to go on family planning. I have completed my senior [term], and now I'm waiting to go to university while the girls who rejected family planning conceived, became teenager mothers and dropped out of school. I encourage other girls and women to use it so as to plan their futures."

- Irene Ayo, 20, a peer educator in a South Sudanese refugee settlement

