UNFPA in Emergencies







Women and girls are more vulnerable in emergencies and have specific needs that are often ignored in crises. They need services for safe pregnancy and childbirth, and protection from gender-based violence. Securing their safety and ensuring their dignity and health promotes the well-being of families and communities.

What is Gender-based violence (GBV)?

Violence against women and girls is one of the most prevalent human rights violations in the world. It knows no



social, economic or national boundaries. Gender-based violence (GBV) is a term used to describe any harmful act that is perpetrated against a person's will, and is based on socially ascribed norms. GBV undermines the health, dignity, security and autonomy of its survivors. Survivors of violence can suffer emotional trauma, sexual and reproductive health consequences, including forced and unwanted pregnancies, unsafe abortions, sexually transmitted infections including HIV, and even death.

In Myanmar, including in the conflict affected areas of Rakhine and Kachin where UNFPA has emergency assistance programmes, GBV takes such forms as sexual violence, intimate partner violence, trafficking, forced and early marriage and exploitation.

What is Sexual and Reproductive Health (SRH)?

Every individual has the right to make their own choices about their sexual and



reproductive health; to have a satisfying and safe sex life, the capability to reproduce, and the freedom to decide if, when, and how often to do so. To maintain one's sexual and reproductive health, people need access to accurate information and safe, effective, affordable and acceptable contraceptive methods of their choice. They must be informed and empowered to protect themselves from sexually transmitted infections. And if they decide to have children, women must have access to services that can help them have a fit pregnancy, safe delivery and healthy baby.

UNFPA's response in Myanmar



In 2012, UNFPA began a SRH programme in Rakhine. In 2013, UNFPA established SRH and GBV interventions in Kachin. UNFPA actively participated in the formulation of a 2015 Humanitarian Response Plan for Myanmar, which is inclusive of indicators to ensure that GBV issues are addressed and that life-saving SRH care and services are provided for displaced women and girls. As part of this humanitarian response, UNFPA support assessments to determine the needs of women and girls in order to target the response accordingly.

Gender-based violence (GBV) programming in emergencies



- UNFPA, in accordance with the "UNFPA Guide for Managing Gender-Based Violence in Emergencies" and the Inter-Agency Standing Committee's "Guidelines for Gender-Based Interventions in Humanitarian Settings", implements a targeted, yet comprehensive, multi-sectoral GBV programme that ensures a coordinated and holistic response. This programme supports the provision of safe spaces (Women and Girl Centres (WGCs) through which case management, psychosocial support, life-skills' activities (including SRH education) and referrals are provided.
- UNFPA provides Dignity Kits to protect the integrity and dignity of women and girls and reduce their vulnerability to GBV in times of crises. Items in the kit include underwear, sanitary napkins, a longyis (sarong), and other hygiene related items.

- Prevention is a critical component of the GBV programme and involves such activities as mainstreaming GBV awareness and risk mitigation across all areas of the humanitarian response, as well as engaging men and boys and community and religious leaders.
- In Rakhine, UNFPA, through the International Rescue Committee, are accessing approximately 40% of the total displaced population of women and girls in Sittwe through Women and Girls Centres.
- In Kachin, UNFPA support the Metta Development Foundation who have established 8 Women and Girls Centres covering 39 camps and villages since March 2014. These centres are reaching approximately 50% of the women and girls in the conflict affected regions.

Sexual and Reproductive Health (SRH) programming in emergencies



- The Sexual and Reproductive Health (SRH) programme implements the Minimum Initial Service Package (MISP) for SRH during emergencies. This is a set of priority activities designed to prevent excess maternal and neonatal mortality and morbidity, reduce HIV transmission, manage the consequences of sexual violence and plan for comprehensive SRH services in the early days and weeks of an emergency. UNPFA also distributes and organises the appropriate use of a range of SRH kits, including post rape kits in emergency areas.
- UNFPA supports the Myanmar Red Cross Society (MRCS) to provide reproductive health services in the Rapid Response Teams deployed by the Ministry of Health during emergencies to support women and girls affected by crises in Rakhine.

- UNFPA ensures access for women to SRH services by supporting the Myanmar Medical Association (MMA) and the Myanmar Nurses and Midwives Association (MNMA), as well as the health staff of the Ministry of Health. These partnerships have ensured the provision of ante-natal care, post-natal care, family planning, health education and referral services in camps and villages through mobile clinics and home visits for displaced persons. SRH interventions began in 2012 in Rakhine State and continue to be offered in 2015.
- The SRH programme covers a total of 13 camps and 30 villages serving all communities in need of emergency assistance in Rakhine State. There are 7 Women and Girl's Centres and 10 midwives who are deployed to the State.
- From 2012 to date, capacity building training in MISP, Maternal and Child Health, SRH Awareness and Sensitisation, Quality RH Service Provision and training for Auxiliary Midwives has taken place across Rakhine and Kachin, as well as at the national level. Over 3,000 participants from the State Health Department, Ministry of Health, and local and international organisations have completed these trainings, contributing to the quality provision of SRH services.



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