

IAWG Training Partnership

Integrating SRH into health system reconstruction

**A toolkit to catalyze participatory planning
to move from the MISP to comprehensive SRH
programming**

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Minimum Initial Service Package (MISP) for Reproductive Health



Surge Capacity training for SRH Coordinators



Objective 1
Ensure health cluster/sector identifies agencies to LEAD implementation of MISP

- RH Officer in place
- Meetings to discuss RH implementation held
- RH Officer reports back to health cluster/sector
- RH kits and supplies available & used

RH Kit 0

Objective 2
Prevent SEXUAL VIOLENCE & assist survivors

- Protection system in place especially for women & girls
- Medical services & psychosocial support available for survivors
- Community aware of services

RH Kit 3

RH Kit 9

Objective 5
Plan for COMPREHENSIVE RH services, integrated into primary health care

- Background data collected
- Sites identified for future delivery of comprehensive RH
- Staff capacity assessed and trainings planned
- RH equipment and supplies ordered

RH Kit 4

RH Kit 5

RH Kit 7

Objective 4
Prevent excess MATERNAL & NEWBORN morbidity & mortality

- Emergency obstetric and newborn care services available
- 24/7 referral system established
- Clean delivery kits provided to birth attendants and visibly pregnant women
- Community aware of services

RH Kit 12

Objective 3
Reduce transmission of HIV

- Safe and rational blood transfusion in place
- Standard precautions practiced
- Free condoms available

RH Kit 1

Standard precautions through kits 1-12

RH Kit 12

RH Kit 2 RH Kit 6 RH Kit 8 RH Kit 9 RH Kit 10 RH Kit 11

Outreach clinical refresher trainings



GOAL
 Decrease mortality, morbidity & disability in crisis-affected populations (refugees/IDPs or populations hosting them)

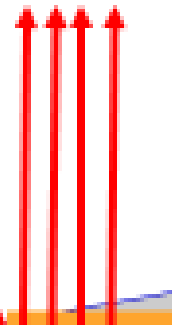
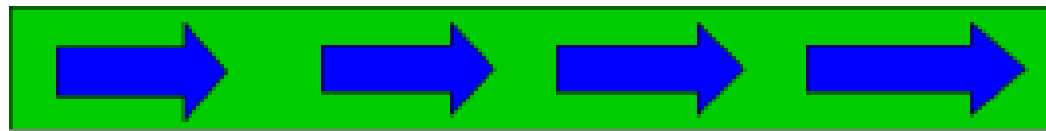
The continuum of an emergency

Emergency

Post-emergency

Destabilizing event

Durable solutions



MISP

Comprehensive SRH services?

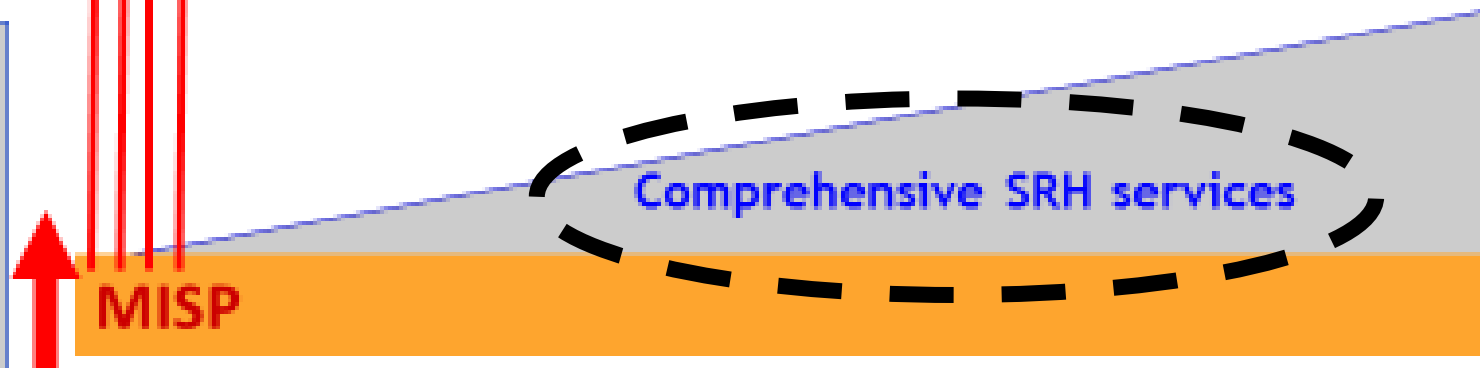
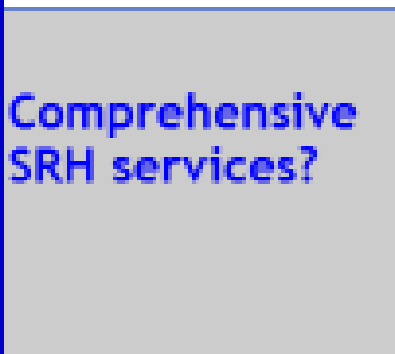
Comprehensive SRH services

Loss of essential services

Restoration of essential services

Relative stability

Return to normality





MISP to CSRH toolkit

Objective of the toolkit

- To guide SRH coordinators in facilitating a national workshop to catalyze participatory planning among national stakeholders and partners in order to integrate comprehensive SRH into national health system reconstruction efforts.

Output: concrete plan to implement priority CSRH services

Audience for the toolkit

- **Facilitator:** SRH coordinator in collaboration with national counterparts.
- **Targeted audience:** national health system reconstruction team and key partners.

Estimated length: 1.5 days

Pre-workshop preparation by the SRH coordinator in collaboration with local partners

- Objective: To prepare background documents to inform the discussions during the workshop
- Methodology: Collection of background SRH data and mapping of key stakeholders

Day 1 of the workshop

Step 1 - Setting a common understanding

- Objective: to set the scene for the workshop with an overview of the essential information that participants need to be aware of in order to effectively plan for comprehensive SRH
- Methodology: interactive PPT presentations
 - Current SRH situation
 - MISP to CSRH
 - HS building block

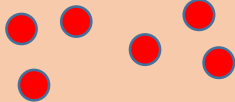

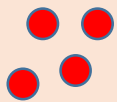
Step 2 - Mapping needs and opportunities related to comprehensive SRH priorities

- Objective: to reflect upon, discuss, and map current needs and opportunities in relation to comprehensive SRH services
- Methodology: personal reflection & group exercise

| | Current needs | Opportunities |
|---|---------------|---------------|
| Service delivery <ul style="list-style-type: none">- Adolescent SRH- Family planning- Maternal and newborn health- Gender-based violence- HIV / sexually transmitted infections- Reproductive cancers- RH cancers- Others | | |
| Health workforce | | |
| Medical commodities | | |
| Health information system | | |
| Financing | | |
| Governance / leadership | | |

Step 3 - Setting planning priorities for comprehensive SRH

- Objective: to agree on a set of planning priorities related to comprehensive SRH
- Methodology: group discussion

| | Lower costs / less resource-intensive / more opportunities available | Higher costs / more resource-intensive / less opportunities available |
|----------------------|---|---|
| High priority needs | FP/STI services integrated in adolescent SRH programs  | Training of midwives  |
| Lower priority needs | Cervical cancer screening using VIA and cryotherapy in a single-visit approach  | |

Step 4 - Team work on agreed planning priorities for CSRH

- Objective: to produce a detailed and practical work plan to implement the top three SRH priorities

| | Next steps | Focal points | By when | Resources needed | Comments |
|----------------------------|------------|--------------|---------|------------------|----------|
| Human resources for health | | | | | |
| Financing | | | | | |
| Policy & governance | | | | | |
| Commodities | | | | | |
| HIS | | | | | |
| Service provision | | | | | |

Day 2

Step 5 - Reporting back and finding synergies

- Objective: to establish a consolidated national work plan to implement priority interventions related to comprehensive SRH

Post-workshop follow-up

- Objective: to ensure that plans are followed through and implementation challenges are addressed
- Methodology: as needed: follow-up meetings, email, etc.



Comments? Ideas?

Piloting opportunities in your setting?