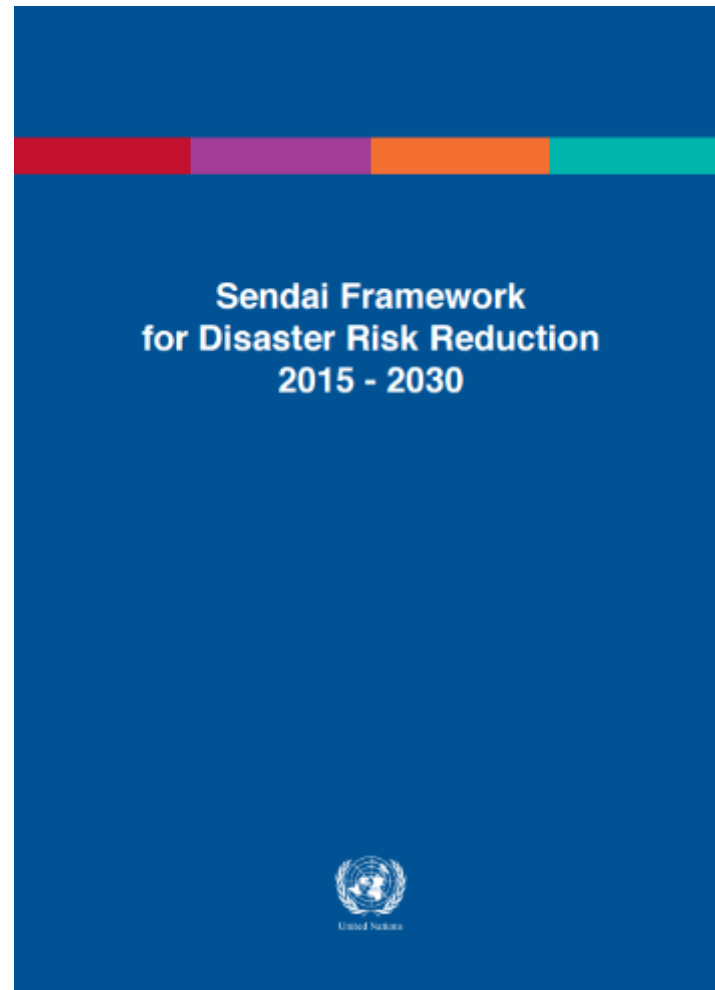




Overview of new initiatives and guidelines

Sandra Krause
Women's Refugee Commission

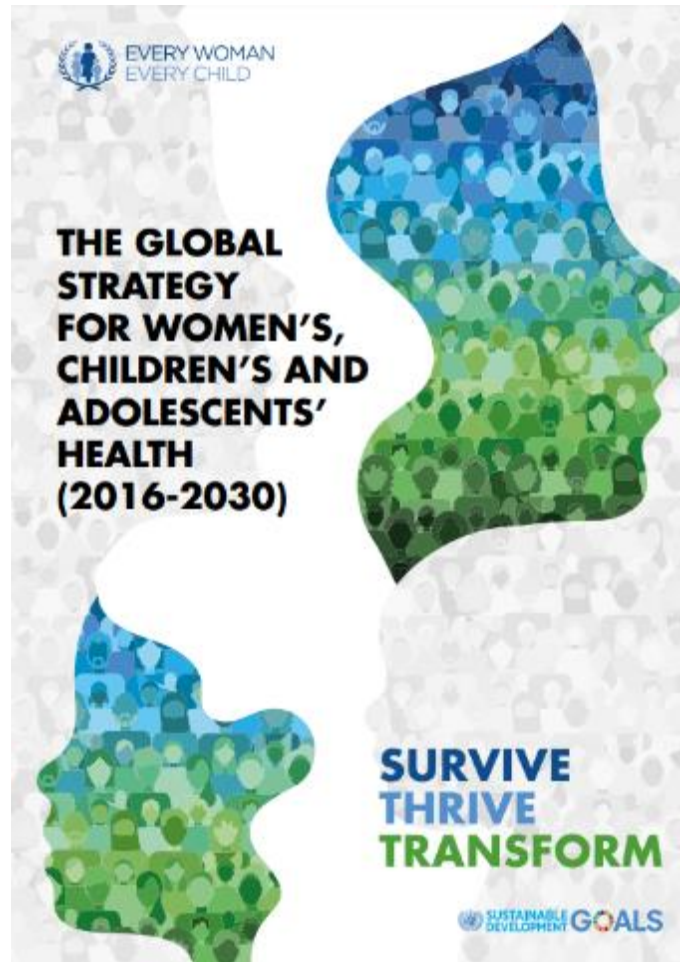
Sendai Framework for DRR 2015-2030



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Every Women Every Child *Everywhere*



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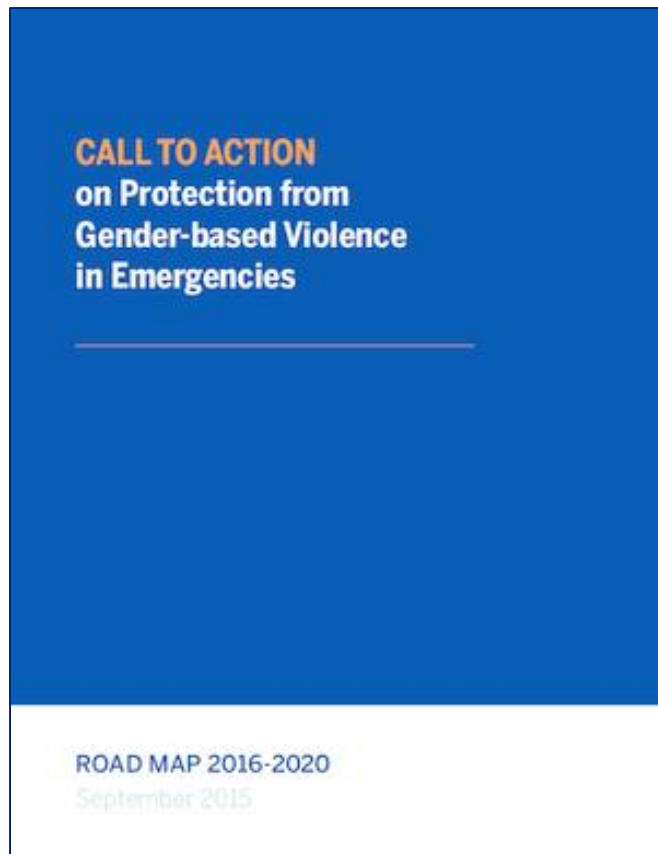
Sustainable Development Goals



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GBV Call to Action and Roadmap (2015)



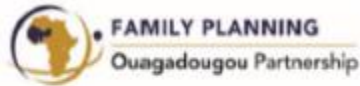
SUMMARY OF INDICATORS AND TARGETS						
PATHWAY OF ACTION	INDICATOR	2016	2017	2018	2019	2020
INTERNAL INSTITUTIONAL POLICIES	Partners with enforceable policies/standards on GBV and gender equality			80%		100%
	Share partners with national policies/plans on GBV and gender equality			80%		100%
	Core specialized GBV services/projects in Strategic Response Plans			Increasing numbers of projects and countries		
	Tracking mechanism for GBV funding at country level			Increasing number of countries		
INTER-AGENCY SYSTEMS	Adherence with national performance accountability of global GBV coordination mechanism (GBV A4H members)		100%	80%		
	GBV coordination mechanism within 14 days of cluster activation			80%	90%	100%
	National GBV coordination mechanism co-led by national actor			30%		50%
	Inter-cluster assessment tools and methods integrate GBV and gender equality			80%		100%
	GBV and gender equality integrated in Humanitarian Program Cycle documents			90%		100%
IMPLEMENTATION	"Package" of core specialized GBV services	Tech. working group formed		Endorsed by partners		New indicator on implementation
	Comprehensive capacity development for GBV specialists		Implemented according to strategy timeline			
	Projects (by country) in Strategic Response Plans that incorporate risk reduction mitigation in line with GBV Guidelines					50%



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FP2020 and the Ouagadougou Partnership



THE DAKAR DECLARATION OF CSOs OF THE OUAGADOUGOU
PARTNERSHIP



DONORS DECLARATION



THE DAKAR DECLARATION OF THE MINISTERS OF HEALTH OF
THE OUAGADOUGOU PARTNERSHIP



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World Humanitarian Summit



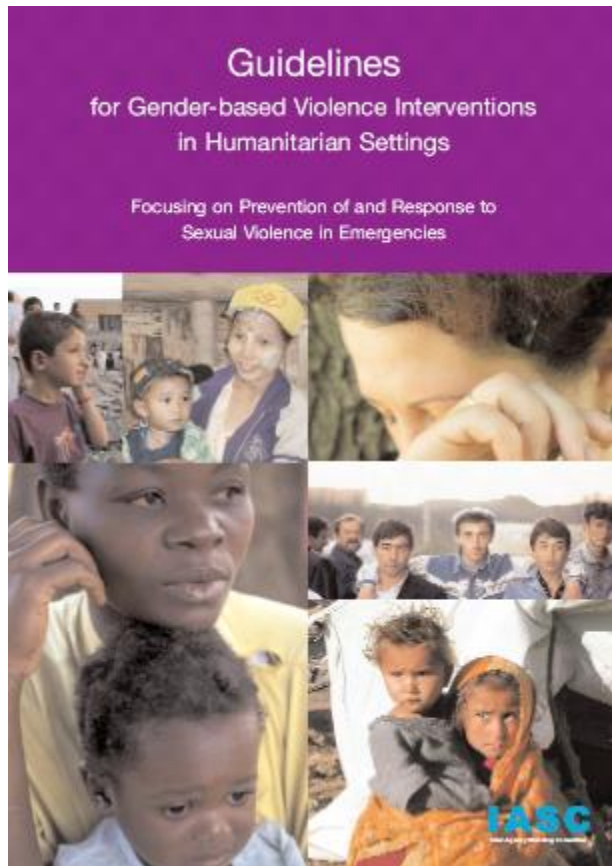
WORLD
HUMANITARIAN
SUMMIT



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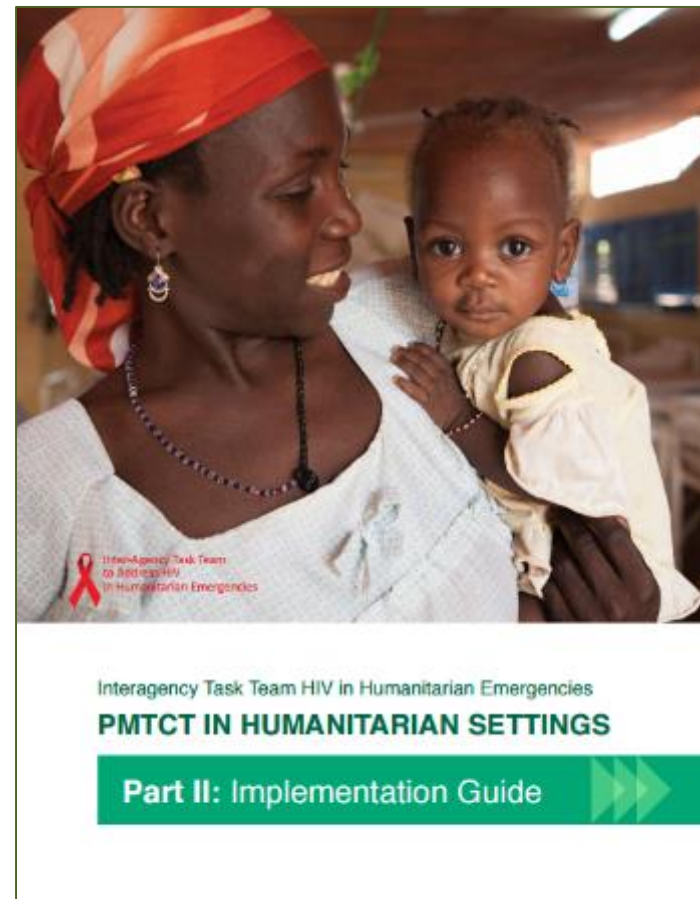
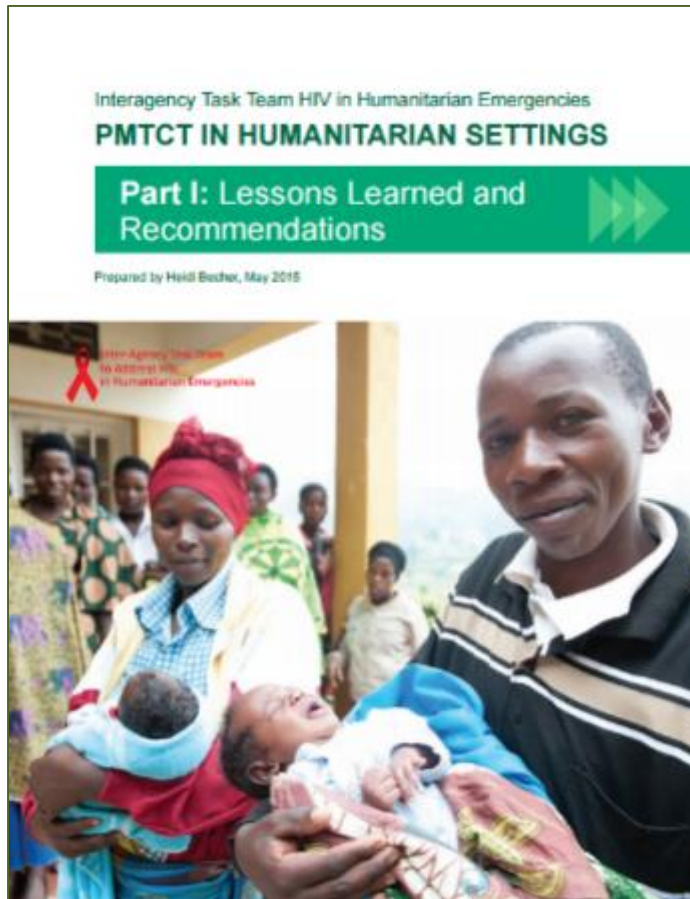
IASC GBV guidelines (2015)



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IATT PMTCT Guidelines (2015)



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Save the Children/UNICEF newborn health guidelines



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UN ISDR RH WG National Monitoring Tool for disaster risk management for health (coming soon)

Integrating Sexual and Reproductive Health (SRH) into Emergency and Disaster Risk Management for Health
Building resilient communities and reproductive health systems

National Monitoring Tool

This document provides recommended actions to countries and partners for the inclusion of sexual and reproductive health (SRH) into policies and plans for emergency and disaster risk management for health.

Priority Areas for Actions

- **Priority 1. Understanding risk: Integrate SRH into health emergency risk assessments and risk communication.**
- **Priority 2. Strengthening disaster risk governance to manage disaster risk: Integrate SRH into disaster risk management policies, plans and coordination mechanisms.**
- **Priority 3. Investing in disaster risk reduction for resilience: Strengthen SRH capacities to build community and individual resilience.**
- **Priority 4. Enhancing disaster preparedness for effective response and to "Build Back Better" in recovery, rehabilitation and reconstruction: Prepare existing SRH services to respond, recover and "build back better" after emergencies.**

Coordinated Emergency and Disaster Risk Management for Health (EDRM-H) involve assessments, prevention, mitigation and preparedness, response and recovery measures at national, sub-national and community levels. SRH policy and program actions, related to emergency and disaster risk management should focus on strengthening SRH services within the current Primary Health Care (PHC) system,¹ while ensuring that crisis-affected populations have access to the priority package of SRH interventions to reduce mortality—the Minimal Initial Service Package (MISP)—during an emergency.

Within this document, all activities assume the existence or development of a coordinated national health sector policy and plan for emergency and disaster risk management for health. Activities should focus on strengthening SRH services within primary health care systems with a specific focus on building the capacity (human, financial, communication, and structural) and ability to implement critical SRH services, as articulated in the MISP, in the case of an emergency and, when required in a manner coordinated with the international community and the cluster system response.

Outcomes of including SRH into EDRM-H strategies

- Increased the capacity of communities and health workers to prepare and respond to emergencies
- Greater resilience of communities prevents, absorbs adapts and reduces the negative impacts of emergencies and disasters
- Reduces vulnerability of at-risk populations to emergencies
- Prevent avoidable morbidity and mortality, particularly among women and adolescents, from SRH complications before, during and after emergencies

¹ Primary health care, as defined by the World Health Assembly 2000: universal coverage, people centered services which focuses healthy service delivery at community level, healthy public policies from all sectors aimed at improving health and effective leadership of the health system which promotes participation of all components of society to address public health needs.

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UNFPA/UNHCR Urban RH Toolkit (coming soon)

Sexual and Reproductive Health Toolkit for Urban Refugees

Until recently, refugees were living in camps, and little attention was given to programming in urban areas.

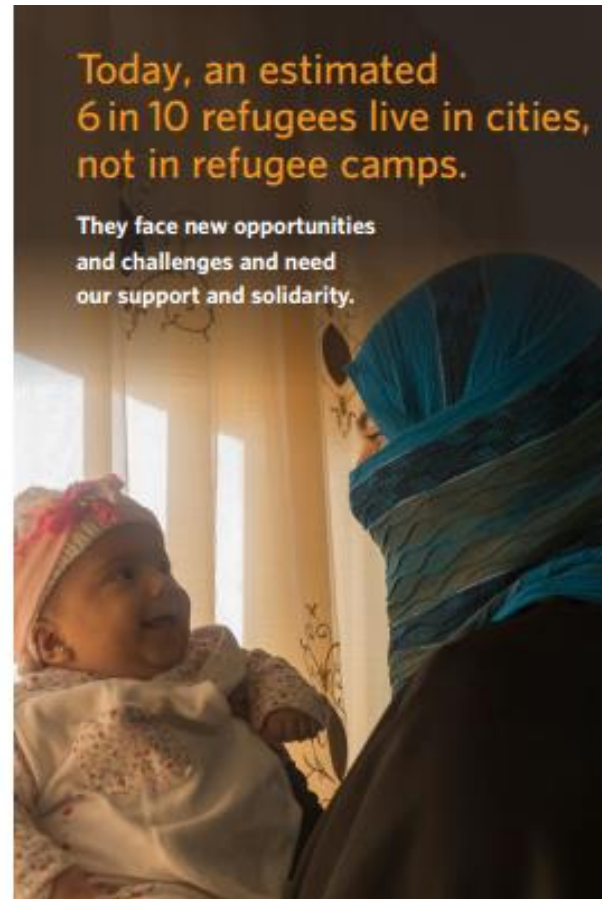
To meet the unique needs of urban refugees, UNFPA and UNHCR have developed a sexual and reproductive health toolkit to help aid workers and partners in planning and programming.

The toolkit comprises complementary tools that focus on decision-making, analysis, mapping of health facilities and services, planning, monitoring and evaluation, advocacy, coordination, community mobilization, and options for the provision of healthcare.

It guides users through a decision-making process to:

- Assess the situation
- Determine priority issues and vulnerable groups
- Create an action plan

The toolkit can be found at www.unfpa.org and www.unhcr.org



Today, an estimated
6 in 10 refugees live in cities,
not in refugee camps.

They face new opportunities
and challenges and need
our support and solidarity.



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IAWG Training Partnership Initiative



 Training
PARTNERSHIP

Strengthening access to and
quality of reproductive
health services in
humanitarian settings



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IAWG Surge Capacity



SRH Coordinators in Geneva discuss the logistics of implementing the MISP. Photo: Ingvill Tveite, NORCAP.



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www.iawg.net