

Improving Women's Health in Emergency Settings WHO's commitment

Progress report-September 2004

In crises associated with violent conflict, women are among the most vulnerable. High levels of gender-based violence, particularly sexual violence, are reported in conflict and post-conflict settings. This often results in sexual trauma, undesired pregnancy, mental distress, sexually transmitted infections and HIV transmission. Health services in crisis-affected settings are often unable to respond adequately to the health needs of women. Crises cause a reduction in numbers of qualified personnel working within health systems; disruption (and reduced accessibility) of public services; and lack of diagnostic tests, equipment and medicines (particularly shortages of emergency contraception and anti-retrovirals for post-exposure prophylaxis following sexual abuse).

The improvement of women's health in crisis has been identified as a key issue within the action of WHO's Health Action in Crisis. From new project's design to the follow-up of existing projects or the involvement in the Inter-Agency coordination on the response to Gender-Based Violence (GBV), several initiatives show the involvement of our department on the issue.

This note describes the work in progress for all the activities whose objective is to improve women's health in crisis.

1. Women's Health Initiative

With regard to this particular new program, the World Health Organization works in collaboration with the UNAIDS Inter-Agency Task Force Team in Southern Africa. Other UNAIDS co-sponsoring organizations namely, UNICEF, UNFPA and UNHCR, national authorities and NGOs are also involved.

The program has 5 distinct *objectives*:

- ✓ Establishing an evidence base on challenges to women's health - particularly sexual and reproductive health in conflict settings, with a focus on the health consequences of violent acts against women, through multi-stakeholder, rapid analysis (with key-informant interviews).
- ✓ Building the capacity of health services to better respond to women's health needs in conflict settings with particular attention to the consequences of violent acts, risks of sexual and reproductive ill health and HIV.
- ✓ Improving the support available to those providing women's health care in crisis settings.

- ✓ Disseminating experiences beyond the high-emphasis settings.
- ✓ Monitoring health services used by women in conflict settings.

A plan of action has been developed but the successful implementation of this program will depend on the availability of dedicated external support. Some of the costs of Phase 1 (scoping phase) are covered through a grant of 50,000\$ already made available by the UNAIDS secretariat under the auspices of the Global Coalition for Women and AIDS.

The scoping phase of the program for which WHO collaborate with UNAIDS is designed to examine the prospects for using a service responsiveness diagnosis as a base for building better capacities for women responsive service development. The first objective of the WHO/UNAIDS joint activity is the development of an appropriate tool for a rapid assessment of the quality and responsiveness of health services to women's health in crisis affected settings. In order to achieve this objective, field visits will be carried out in two countries in the Southern Africa region that have been affected by different types of crisis: Angola and Zimbabwe. The phase 1 is initiated from 23rd of August to 30th of December 2004.

2. WHO GBV projects in DRC and Liberia (Finnish Funds) and Darfur, Sudan

The Finnish Government responded positively to the WHO request to support two pilot-project on "assisting victims of sexual and gender-based violence in war affected African countries facing humanitarian crisis".

- **Democratic Republic of Congo:** The WHO project on Gender Based Violence (GBV) has five expected results: Needs assessment; Training of service providers; Multi-sectoral services support, including Health, Psychosocial and Viable economic activities; Advocacy, Coordination, Monitoring and Evaluation. The WHO country team collaborates with other key players including the Ministry of Health, national NGOs and international agencies.
- **Liberia:** the WHO project on GBV aims to build local capacity of health workers working with survivors of GBV, and to strengthen existing health services to respond to GBV. There is also an existing network around GBV issues in Liberia and all the UN agencies are somehow involved as well as several NGOs (IRC plays a central role). A consultant has been recruited to assist further implementation of the project.

In both countries, an assessment visit took place in both countries and a plan of action had been developed. WHO HQ, jointly with AFRO, are providing technical support to the Country Office teams. Among others, some tools have been sent to the countries teams in order to help them to develop and/or adapt some training modules for health providers working with victims of GBV. Regular teleconferences are held for experience sharing and discussions on constraints and difficulties.

- **Sudan, Darfur:** WHO is in the process to address women's health needs and GBV control efforts in Darfur. Also as co-chair of the Inter-Agency Standing Committee Task force on Gender, WHO looks for ways to stimulate better coordination and appropriate response to the needs of women affected by the crisis.

3. WHO Training activities related to Gender

- WHO activities in Afghanistan this year included training activities with health related courses to ensure wider coverage and accessibility of health services to women, addressing the male/female imbalance in the health workforce by boosting the number of skilled birth attendants, nurses, midwives and other allied health personnel. Through community based initiatives, WHO is giving the opportunity to thousands of women to participate in income generating activities and helping them to achieve better health and quality of life.
- Capacity building/Training: In the past year, the Ahfad University for Women collaborated with WHO to build regional capacity on gender and rights. The main goal is to increase the number of programme managers, planners, policy-makers and trainers with both a gender and a rights perspective in reproductive health. As a result, Ahfad University is running a training course on Gender & Rights in Reproductive Health (20 November to 02 December 2004) for mid-top level health professionals (both male and female) for Sudan and the Eastern Mediterranean region, which is the first and only kind of its kind to be run in Sudan. The need for conducting a highly specialized course on Gender and Rights in Reproductive Health (RH) comes at very crucial time, whereby RH programs in Sudan and at regional levels are increasing. Courses will be run for 3 subsequent years.

4. The Inter-Agency Standing Committee Task Force on Gender and Humanitarian Assistance (WHO Co-Chair)

A) The Gender TF activities

The IASC Gender TF meets monthly and is co-chaired by OCHA and WHO.

The activities of the TF for 2004 include the integration of a section on gender mainstreaming in the ECOSOC report on strengthening Humanitarian Coordination, the review of gender mainstreaming in the CAP, the integration of gender perspective into the IASC Guidelines on Emergency Preparedness and Response, the relationship with the women, peace and security TF and the development of a tool-kit on Gender-based violence in Humanitarian Crises.

The IASC TF on Gender and Humanitarian Assistance has recently undertaken two major independent reviews on IACS activities for gender mainstreaming:

- ✓ Review of the IASC 1999 Policy on Integration of a Gender Perspective in Humanitarian Assistance (July 2004).
- ✓ Review of Gender Mainstreaming in the CAP (December 2003).

B) The IASC TF activities on Gender-Based Violence in emergency settings

- The revision of the "*Clinical Management for Rape Survivors Guide: Developing protocols for use in emergency situation*" is under process. This document is being updated to reflect changes in technical content and the WHO guidelines for medico-legal care for victims of sexual violence published by the WHO departments of violence and injuries prevention (VIP) and of Gender and women's health department (GWH) last year. A final draft is expected by end of September. This new version is being developed jointly by WHO, UNHCR, UNFPA and ICRC. The agencies are discussing developing training materials based on these guidelines.
- A workshop on GBV in emergency settings jointly organized by UNFPA and WHO took place on the 1st and 2nd of July. Several UN agencies, ICRC and NGOs were represented (MSF, RHRC, OXFAM). The objectives of this workshop were the following ones:
 1. Agree on the final multi-sectoral Matrix for GBV interventions in Emergency Settings
 2. Decide on the next steps towards developing the Guidelines on GBV interventions in Emergency Settings, including
 - ✓ division of responsibilities for fact sheet writing
 - ✓ drafting a work plan and timeline
 - ✓ discussing evaluation studies, and peer review and field testing of the guidelines
 - ✓ discussing funding issues
- The main output of this workshop had been the development of a draft multi-sectoral matrix for GBV projects in emergency settings. Peer-review and field-testing would be the next steps.

5. *Health in emergencies: the issue 20 of the Health Action in Crisis department's newsletter focusing on Women's health in crisis*

Health in Emergencies is a quarterly newsletter produced by Health Action in Crises. Consequently to HAC involvement on this thematic, the issue 20 of the newsletter will be dedicated to "Women's Health in crisis".

The objective of the newsletter is to highlight effective interventions to improve women's health in crisis situations. Experienced contributors from both UN system and NGOs are asked to submit situation analyses on the main threats to women's health in crisis settings and case studies. Women's access to health care, sexual violence, reproductive health and mental health will be examined in order to underline strategies to meet the needs of women in crisis situations.

The Editorial Team is currently identifying potential authors. The newsletter will be published end of October.

To see back issues of the newsletter, please visit the HAC Web site at:

http://www.who.int/water_sanitation_health/en/bulletin_n.19_ok.pdf (Issue 19: "World Water Day 2004, Water and Disasters") or <http://www.who.int/disasters/repo/12010.pdf> (Issue 18:"Human resource development in Crisis").