

# Reproductive Health Summary Sheet



## What do I need to know?

- Every year an estimated 500,000 maternal deaths occur
- Countries in conflict or some form of instability have the highest maternal mortality rate and poor reproductive health indicators
- Approximately 4% of a population will be pregnant at a given time, and among these an estimated 15% will experience obstetric complications
- The main causes of maternal death are: hemorrhage; hypertensive disorders, sepsis/infection, complications due to abortion
- The Minimum Initial Service Package for reproductive health can be implemented in the immediate phase of a crisis
- Skilled attendance of delivery, clean delivery practice, and access to quality emergency obstetric care are key interventions to prevent maternal death
- No need to do an assessment to implement the Minimum Initial Service Package

## How do I plan an intervention program?

### Prioritize Interventions

- 1) Initial phase of an emergency:** Minimum Initial Service Package
  - Prevent excess maternal and neonatal mortality by providing:
    - a) clean delivery kit provision with information package
    - b) 24/7 referral for emergency obstetrics care
    - c) provision of midwifery kit and availability of 24/7 skilled birth attendance
  - Reduce transmission of HIV/AIDS, prevent sexual violence, and provide medical assistance to survivors
- 2) Comprehensive Reproductive Health (CRH) – after the initial acute phase**
  - Comprehensive reproductive health assessment
  - Plan for comprehensive reproductive health care program: F-ANC, PNC, EmOC, and FP
  - Consider ARSH – based on findings of the assessment
  - The CRH program needs to be context-specific and informed by a comprehensive needs assessment.

## How do I monitor the program?

- The following indicators are recommended for measurement of progress:
- Number of facilities that provide basic EmOC services –1:10,000
  - Number of facilities that provide comprehensive EmOC services 1:150,000
  - Skilled birth attendance rate
  - Met EmOC needs
  - Number of clean delivery kits distributed and utilized
  - Contraceptive prevalence rate

## **How do I work with the community?**

- Promote skilled attendance of deliveries
- Train community health workers in the identification of ‘visibly pregnant’ women and distribution of clean delivery kits and information package
- Create awareness where people can access reproductive health service
- Work with community committee to organize the 24/7 referral for obstetric emergencies
- Work with the community committee on prevention of sexual violence

**This Document has been adapted from the following sources:**

**The Minimum Initial Service Package for Reproductive Health in Crisis Situations: A distance learning module 2006**

**One day introduction to Reproductive Health Issues in Refugee Settings 1997**

**Obstetrics in situations of displacement, MSF 2003**