

DELIVERING HUMANITARIAN ACTION DURING COVID-19



How the International Planned Parenthood Federation's humanitarian programme is responding to the COVID-19 pandemic in fragile and humanitarian settings

The COVID-19 pandemic is affecting countries across the entire world, including in already fragile settings. COVID-19 could spread rapidly in fragile settings due to poor health infrastructures and living conditions, malnutrition, vaccine preventable diseases, and water-borne diseases.

The IPPF Humanitarian Hub is working with technical colleagues within the IPPF Secretariat to develop and disseminate guidance on preparedness and response for Member Associations (MAs). This includes rationale use of personal protective equipment, and how MAs can work within their populations and service delivery points to reduce exposure to the virus, participate in early warning systems and build local awareness and capacity to cope.

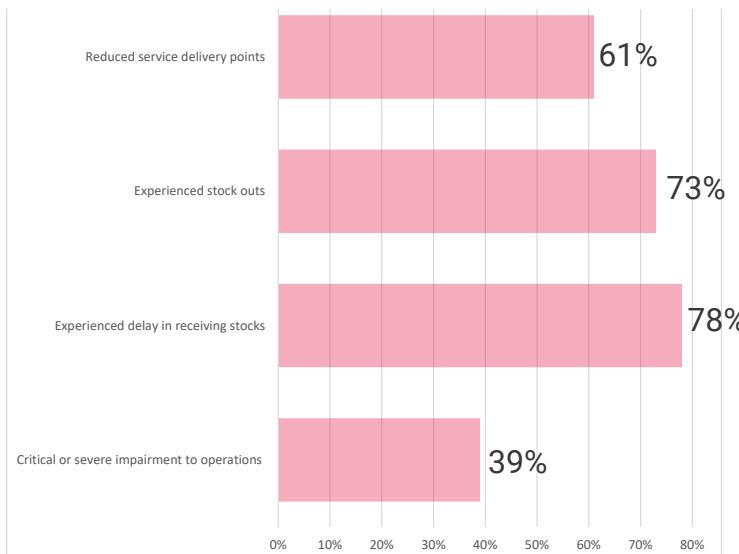
Member Associations in fragile and humanitarian settings are struggling to ensure continuity of SRH services during the crisis, due to a decrease in the number of operational service delivery points, staff having to work remotely, stock shortages and disruption in supply chain management.

IPPF is unique in our positioning with our local understanding and continue to advocate for greater meaningful engagement of local actors.

KEY INDICATORS

	49	MAs ENGAGED IN HUMANITARIAN RESPONSE
	61%	REDUCTION IN SERVICE DELIVERY POINTS
	37%	REDUCTION IN SRH SERVICES (JAN-MAR)
	~70%	PARTICIPATED IN COORDINATION MECHANISMS
OF THOSE WHO PARTICIPATED IN COORDINATION:		
	68%	ACCESSED TECHNICAL ASSISTANCE
	41%	ACCESSED SRH OR PPE COMMODITIES
	26%	ACCESSED FUNDING

Impact of Covid-19 on IPPF Member Associations operating in humanitarian settings



In late May 2020, a survey was sent out to IPPF's global membership to assess what effect the COVID-19 pandemic is having on their work in order to inform priorities for an IPPF response.

124 members responded, including 49 who are currently operating in humanitarian settings. The data shows that the pandemic continues to have a impact on the delivery of sexual and reproductive healthcare and supply chains.



The International Planned Parenthood Federation's humanitarian programme is responding to the COVID-19 pandemic in fragile and humanitarian settings, all over the world.

Afghanistan

Afghanistan is particularly vulnerable to COVID-19 due to the limited availability of properly equipped medical facilities, inadequate numbers of trained medical personnel, and the damaging effects of 40 years of war. To respond to the restricted mobility and fear of women in accessing the health facility, the Afghan Family Guidance Association (AFGA), took the initiative of providing SRHR services through community outreach midwives. Their COVID-19 response was partially supported through Australian Aid under the SPRINT programme.

42,821

FP clients reached through the community midwife program and static clinics

19,953

Total Couple Year Protection (CYPs) (FP only)

*3 month data



Innovation during COVID-19

Sudan

Years of instability in Sudan has weakened the health systems, resulting in low modern method of contraceptive use and high maternal mortality. After the outbreak of COVID-19 in Sudan, IPPF's Member Association, the Sudan Family Planning Association, launched a call centre that offered the full package of SRHR services to the 18 states of Sudan, 24 hours per day, and is expected to reach 73.8% of the population who own phones.

In the first month alone, over 3,000 clients were served through the hotline. 69% of callers were women and 31% men, and 23% were under 25 years of age. Key SRH services requested include contraception and infertility, antenatal care, gynaecological and abortion related queries.