Objective 1

Ensure health cluster/sector identifies agency 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

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

Objective 3

Reduce transmission of HIV
- Safe and rational blood transfusion in place
- Standard precautions practiced
- Free condoms available

Objective 4

Prevent excess MATERNAL & NEONATAL mortality & morbidity
- EmONC services available
- 24/7 referral system established
- Clean delivery kits provided to birth attendants and visibly pregnant women
- Community aware of services

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

Additional Priorities
- Continue family planning
- Manage symptoms of sexually transmitted infections
- Continue HIV care and treatment
- Distribute hygiene kits and menstrual protection materials

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

- **Provide contraceptives, such as condoms, pills, injectables and IUDs, to meet demand**
- **Source and procure contraceptive supplies**
- **Provide staff training**
- **Establish comprehensive family planning programs**
- **Provide community education**

<table>
<thead>
<tr>
<th>SUBJECT AREA</th>
<th>MINIMUM (MISP) RH SERVICES</th>
<th>COMPREHENSIVE RH SERVICES</th>
</tr>
</thead>
<tbody>
<tr>
<td>FAMILY PLANNING</td>
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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Kit 0</td>
<td>Administration</td>
<td>Orange</td>
</tr>
<tr>
<td>Kit 1</td>
<td>Condom (Part A is male condoms + Part B is female condoms)</td>
<td>Red</td>
</tr>
<tr>
<td>Kit 2</td>
<td>Clean Delivery (Individual) (Part A + B)</td>
<td>Dark blue</td>
</tr>
<tr>
<td>Kit 3</td>
<td>Rape Treatment</td>
<td>Pink</td>
</tr>
<tr>
<td>Kit 4</td>
<td>Oral and Injectable Contraception</td>
<td>White</td>
</tr>
</tbody>
</table>

### GENDER-BASED VIOLENCE

- **Coordinate mechanisms to prevent sexual violence with the health and other sectors/clusters**
- **Provide clinical care for survivors of rape**
- **Inform community about services**
- **Expand medical, psychological, social and legal care for survivors**
- **Prevent and address other forms of GBV, including domestic violence, forced/early marriage, female genital cutting,**
- **Provide community education**
- **Engage men and boys in GBV programming**

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</tr>
</thead>
<tbody>
<tr>
<td>Kit 5</td>
<td>STI</td>
<td>Turquoise</td>
</tr>
</tbody>
</table>

### MATERNAL AND NEWBORN CARE

- **Ensure availability of emergency obstetric and newborn care services**
- **Establish 24/7 referral system for obstetric and newborn emergencies**
- **Provide clean delivery packages to visibly pregnant women and birth attendants**
- **Inform community about services**
- **Provide antenatal care**
- **Train skilled attendants (midwives, nurses, doctors) in performing emergency obstetric and newborn care**
- **Increase access to basic and comprehensive emergency obstetric and newborn care**

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<td>Kit 6</td>
<td>Clinical Delivery Assistance (Part A + B)</td>
<td>Brown</td>
</tr>
<tr>
<td>Kit 7</td>
<td>IUD</td>
<td>Black</td>
</tr>
<tr>
<td>Kit 8</td>
<td>Management of Complications of Abortion</td>
<td>Yellow</td>
</tr>
<tr>
<td>Kit 9</td>
<td>Suture of Tears (Cervical and vaginal) and Vaginal Examination</td>
<td>Purple</td>
</tr>
<tr>
<td>Kit 10</td>
<td>Vacuum Extraction for Delivery (Manual)</td>
<td>Grey</td>
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### STIs, INCLUDING HIV, PREVENTION & TREATMENT

- **Ensure safe and rational blood transfusion practice**
- **Ensure adherence to standard precautions**
- **Guarantee the availability of free condoms**
- **Provide syndromic treatment as part of routine clinical services for patients presenting for care**
- **Provide ARV treatment for patients already taking ARVs, including for PMTCT, as soon as possible**
- **Establish comprehensive STI prevention and treatment services, including STI surveillance systems**
- **Collaborate in establishing comprehensive HIV services as appropriate**
- **Provide care, support and treatment for people living with HIV/AIDS**
- **Raise awareness of prevention, care, treatment services of STIs**

### CRISIS

- Crude mortality rate >1 death/10,000/day
- Mortality returns to level of surrounding populations

### POST-CRISIS/PREPAREDNESS

The RH Kit is designed for use for a 3-month period for a varying population number and is divided into three "blocks" as follows:

**Block 1:** Six kits to be used at the community and primary health care level for 10,000 persons / 3 months

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**Block 2:** Five kits to be used at the community and primary health care level for 30,000 persons / 3 months

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**Block 3:** Two kits to be used at referral hospital level for 150,000 persons / 3 months

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<tbody>
<tr>
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<tr>
<td>Kit 12</td>
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### Resources:

- MISP Distance Learning Module: [http://misp.rhrc.org](http://misp.rhrc.org)
- Inter-agency Working Group on Reproductive Health in Crises: www.iawg.net
- Reproductive Health Response in Crises (RHRC) Consortium: [www.rhrc.org](http://www.rhrc.org)

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How to order RH Kits for Crisis Situations booklet:

UNFPA – Contact local country offices or
220 East 42nd Street
New York, NY 10017 USA
Tel: +1 212 297 5245
Fax: +1 212 297 4915
Email: hru@unfpa.org
www.rhr.org/resources/rrkit.pdf

How to order RH Kits:

UNFPA Procurement Services Section
Emergency Procurement Team
Midsommerlen 3
2100 Copenhagen
Denmark
Tel: +45 3546 7368 / 7000
Fax: + 45 3546 7018
procurement@unfpa.dk

April 2011 © IAWG. Based on Inter-Agency Field Manual on Reproductive Health in Humanitarian Settings.