



Focusing on

# Women and Girls in Humanitarian Emergencies in Eastern Europe and Central Asia



# Key Issues of Concern

People living in countries in the Eastern Europe and Central Asia region are vulnerable to humanitarian emergencies sparked by conflict both within the region itself and in neighbouring countries, and to those created by natural disasters. The Syrian refugee crisis that has spread into Turkey and onwards into Europe and the armed conflict in Ukraine both continue to test the readiness of humanitarian response efforts in the region, while floods and earthquakes remain a regular threat to many countries.

In any kind of emergency situation, women and girls are among those most affected. But issues related to their sexual and reproductive health (SRH) and to gender-based violence tend to be insufficiently addressed.

When women and adolescent girls can obtain sexual and reproductive health services, are protected from sexual and gender-based violence, and can access a variety of humanitarian programmes that deliberately tackle inequalities, the benefits of interventions grow exponentially. They also carry over from the acute phase of a crisis well into the future, as countries rebuild and people reclaim their lives and dignity, increasing the resilience of both communities and individuals.

## Maternal and child health

Displaced women and girls are particularly vulnerable to high-risk and unintended pregnancies, miscarriages, perinatal complications, unsafe abortions, unsafe deliveries, and resulting deaths due to the breakdown or disruption of critical sexual and reproductive health infrastructure and services that occur in crisis settings. Even where these services exist, women may have difficulty accessing them as a result of poor coordination, information or insecurity. Many pregnant women and girls end up giving birth without assistance from a skilled health worker.

## Gender-based violence and exploitation

Though sexual violence typically escalates in times of conflict and when people are on the move, the provision of psychosocial support to survivors is still not always adequate and more needs to be done to prevent and respond to sexual and gender-based violence. What is needed on a more consistent basis is access to reliable information and services and well-trained responders in different sectors, as well as multi-sectorial referral and response systems.








## Early and forced marriage

Girls' vulnerability to child marriage can increase during humanitarian crises when family and social structures are disrupted. In times of conflict and natural disaster, parents may marry off their underage daughters as a last resort, either to bring the family some income or reduce its size in times of economic hardship, or because they believe it will offer the girl some sort of protection, particularly in contexts where sexual violence is common.

## HIV and other sexually transmitted infections

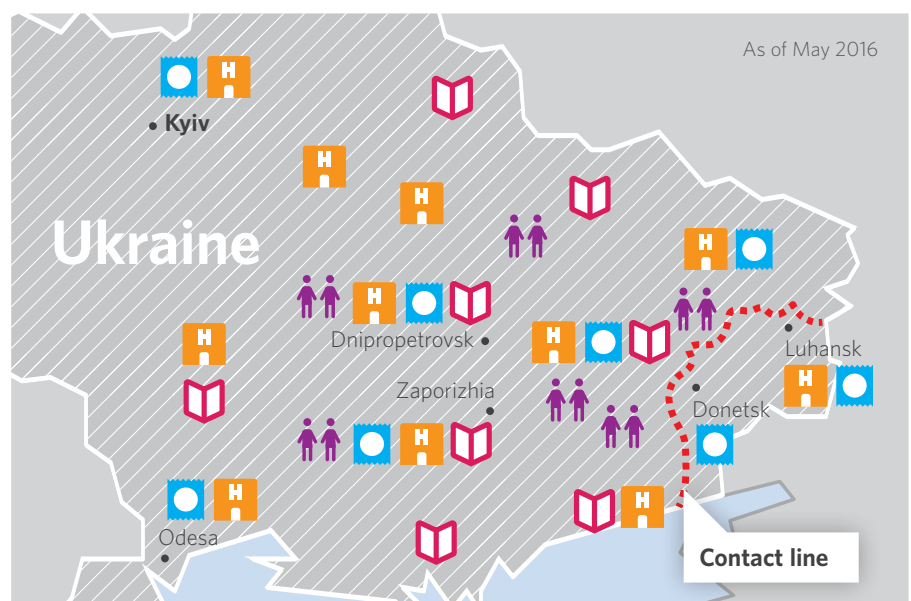
In times of crisis, many factors leave individuals especially vulnerable to contracting HIV and STIs. These can include the breakdown of social and information networks, the disruption of medical services, the separation of families, a lack of condoms, and an increase in sexual violence and high-risk behaviour, including resorting to sex work. The needs of displaced people cannot be overlooked in national HIV initiatives, and policies to meet their special needs are vital.

## Legend

	Safe spaces
	Mobile clinics*
	Reproductive health / gynaecological kits
	Dignity kits
	Condoms
	Mobile teams
	Capacity building

\*Includes financial and material support for permanent health facilities in some countries.

## Humanitarian interventions in Ukraine



The placement of icons serves as an illustration of key types of UNFPA's humanitarian interventions; it is not necessarily geographically accurate or exhaustive. The boundaries shown on this map do not imply official endorsement or acceptance by the United Nations.

# UNFPA's Work in the Region

UNFPA collaborates with different partners to provide sexual and reproductive health services and address gender-based violence in crisis settings, and is working across the region to ensure that the Minimum Initial Service Package for Reproductive Health in crisis situations is systematically implemented at the onset of new crises and in on-going emergency settings.

## Humanitarian interventions along the European transit route and across the Syrian border



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As of May 2016

### Enabling healthcare workers to provide life-saving SRH services

UNFPA supports free-of-charge, life-saving sexual and reproductive health services, such as deliveries, including C-sections, treatment for the management of miscarriage, and post-rape treatment, by providing essential medicines and medical equipment to local healthcare facilities. It also does so by providing mobile clinics to health authorities or NGOs to enable health services to be made available in areas without permanent facilities.

- ✓ In the former Yugoslav Republic of Macedonia, UNFPA has procured ultrasound equipment, delivery beds, neonatal resuscitators, and other crucial reproductive health equipment for maternity wards in hospitals along the refugee transit route through the Balkans to Western Europe.

### Providing commodities and information to affected populations

UNFPA distributes reproductive health commodities such as condoms and pregnancy tests to refugee, migrant, and internally displaced women and adolescent girls. It also distributes dignity kits containing essential personal hygiene items, especially those important for female hygiene, and works to increase awareness on antenatal care, danger signs in pregnancy, and STIs through distribution of informational materials and social-media messages.

- ✓ In Serbia, UNFPA worked with the Ministry of Health to develop leaflets on complications in pregnancy and on antenatal and postnatal care; translate them into English, Arabic, Farsi, and Urdu; and distribute them through local health centers, international organisations and local NGOs. UNFPA also provided dignity kits tailored to meet specific needs of women and girls while en route.

### Preventing and responding to gender-based violence

UNFPA works with partners to ensure that sexual and gender-based violence among refugees, internally displaced persons, and other crisis-affected people is prevented and, when it does occur, that the needs of survivors are adequately addressed. This includes building the capacity of service providers (health, psychosocial, and police) and local NGOs to identify, address, and prevent gender-based violence and harmful practices.

- ✓ In Ukraine, 21 UNFPA mobile teams of psychologists and social workers are making the rounds of five regions affected by the conflict in the country's east. They are offering support to women from at-risk groups, including survivors of gender-based violence, with more than 800 people receiving help every month.

## Operating 'safe spaces' for women and girls

UNFPA operates 'safe spaces' where women and adolescent girls can feel physically and emotionally safe, and where they can receive the sexual and reproductive health and psychosocial support services they need.

- ✔ In Turkey, 20 UNFPA-run 'safe spaces' provide SRH services and counselling for refugee women and girls, and carry out other activities that promote women's empowerment such as vocational and life-skills trainings.

## Building capacity among healthcare providers

UNFPA leads trainings on sexual and reproductive health, sexual and gender-based violence, clinical management of rape, the Minimum Initial Service Package for Reproductive Health, emergency response, and emergency obstetric care for healthcare providers in crisis areas.

- ✔ In Turkey, UNFPA's capacity-building efforts led to more than 250 Syrian and Turkish service providers having been trained on sexual and reproductive health in crisis in 2015.

## Advocating for systemic changes

UNFPA supports countries in the region to integrate all priority SRH services in their health emergency response plans and other key policies so that they are prepared when disaster strikes and all health service providers are ready to deliver the Minimum Initial Service Package for Reproductive Health at the onset of crises.

- ✔ In the former Yugoslav Republic of Macedonia, UNFPA has worked with the Government in developing Standard Operational Procedures for preventing and responding to gender-based violence in humanitarian crises. This contributes to strengthening the country's emergency response capacities and serves as an entry point for improving national policies on addressing violence against women.

# Priorities for the Future

Disaster risk reduction and emergency preparedness are some of the keys to reducing the impact of emergency situations on populations, and to ensuring a better response to future crises. Countries in Eastern Europe and Central Asia have been taking action to enhance their preparedness to meet the SRH needs of women and girls affected by disasters.

A region-wide assessment conducted in 2014 revealed well-developed legislative and policy frameworks in most countries for providing life-saving SRH services, but challenges remain in integrating all sexual and reproductive health services in humanitarian settings into countries' health sector emergency response plans.

- Place the protection and health of women and girls at the centre of humanitarian preparedness and responses, ensuring that the needs of women and young people, especially adolescent girls, are specifically addressed in all humanitarian settings.
- Ensure that populations affected by crises have full access to sexual and reproductive health and can exercise their reproductive rights.
- Ensure that gender-based violence prevention and response are incorporated in crisis and post-crisis planning and interventions across all sectors.
- Strengthen gathering and use of population data, disaggregated by sex and age and other relevant characteristics, to inform planning, decision-making, and accountability to affected populations.
- Empower and engage women and young people in all phases of humanitarian action.

