



IntraHealth

Because Health Workers Save Lives.



Promoting social cohesion of migrant populations by addressing reproductive health care needs:

Sustainable cities, human mobility and international migration

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TIMELINE

PUTTING REPRODUCTIVE HEALTH
OF MIGRANTS ON THE MAP





1993: An editorial in The Lancet denounces the absence of reproductive health services for displaced populations

1993

Photo: Albert Gonzalez Farran, UNAMID



1994: Declaration for the reproductive health and rights of people affected by conflict and natural disasters at the International Conference on Population and Development.

Photo: Albert Gonzalez Farran, UNAMID

1993 **1994**





In 1996, the IAWG developed the Minimal Initial Service Package (MISP) for Reproductive Health.

1993 1994 **1996**



In 2010, the IAWG released a statement on family planning for women and girls as a lifesaving intervention in humanitarian settings.

Edward Echwalu

1993 1994 1996

2010





July 2012: The IAWG Steering Committee sent an open letter to the organizers of the London Summit on Family Planning

Mohamad Almahady, UNAMI

1993 1994

1996

2010



Edward Echwalu

SRH services for vulnerable populations must encompass:

- Sexually Transmitted Infections (STIs) and HIV/AIDS
- Maternal and newborn health
- Sexual violence

Challenges: baseline from 5 countries

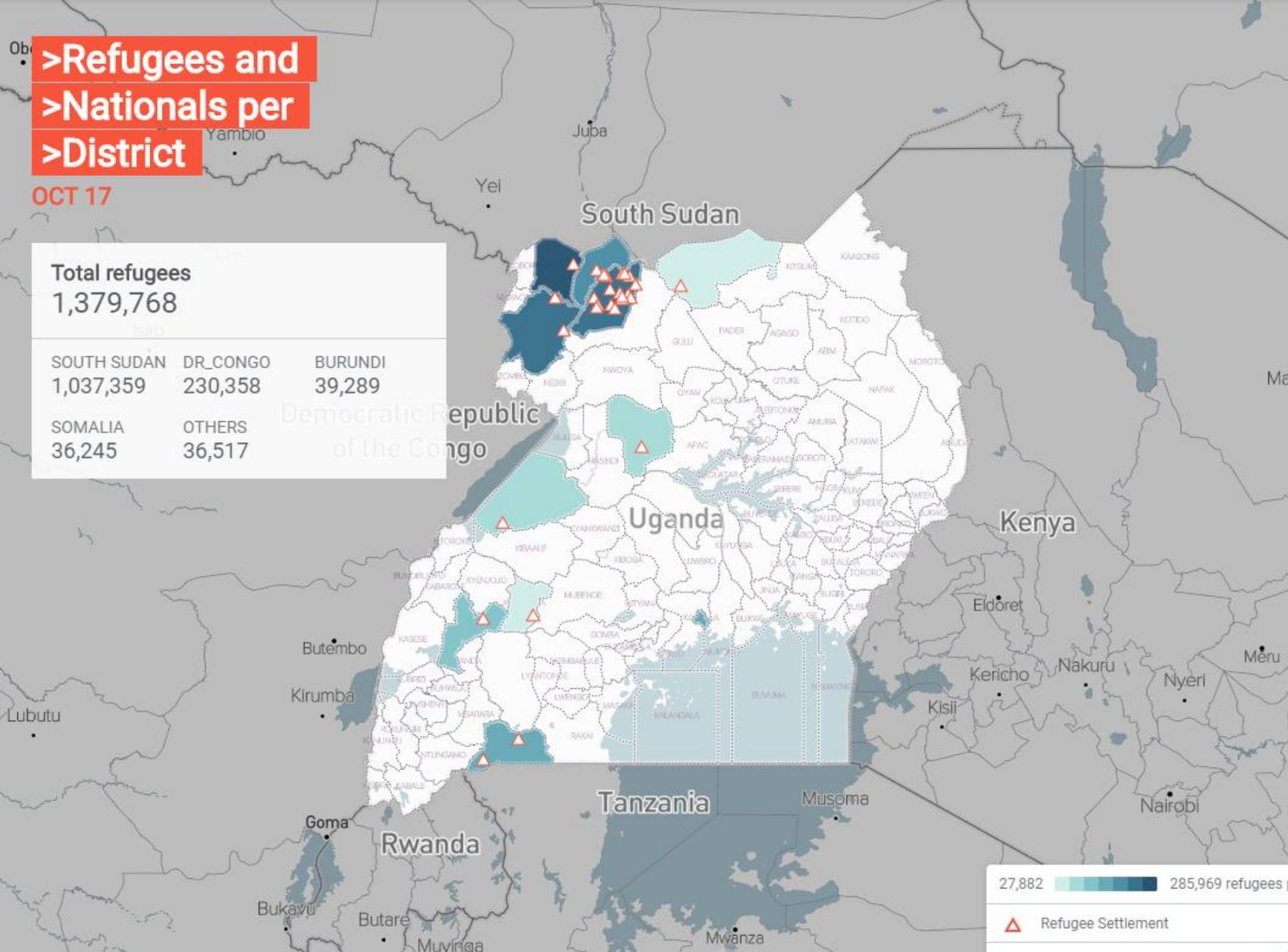
- Lower contraceptive use in refugee camps than in areas surrounding camps
- Access to information and services is difficult for adolescents
- Emergency contraception only available in the context rape
- Poor quality of services
- Limited availability of long-term and permanent methods.



>Refugees and
>Nationals per
>District

OCT 17

Total refugees		
1,379,768		
SOUTH SUDAN	DR_CONGO	BURUNDI
1,037,359	230,358	39,289
SOMALIA	OTHERS	
36,245	36,517	



“ Many South Sudanese refugees had never heard of – let alone seen – an intrauterine device before. When healthcare workers told them these contraceptive methods were effective for at least several years and did not require a daily pill or regular clinic visits, they were eager to learn more.



RH services for South Sudanese in Uganda

- **Mapping pregnant women living in the settlements** and encouraging them to attend ante-natal care classes
- **Recruiting and supporting midwives** in health centers
- **Provision of dignity kits** to newborns and mothers at health facilities
- **Maintenance of ambulances** supporting maternal and other medical referrals
- **Sexual and reproductive health awareness targeting youth**
- **Forming Anti GBV clubs in schools**
- **Supporting communities to realize social change** using the SASA! Methodology

Key Take-Aways

- **Call to action for all sectors** (private, government, civil society) to address funding gaps
- **Raise awareness** of the need
- Integrate the **Minimum Initial Service Package** of reproductive health services across multiple sectors responding to the emergency
- **Train health workers** to provide comprehensive reproductive health care
- **Engage and educate refugee communities** about reproductive health rights