



UNFPA

Humanitarian Action

2016 Overview



United Nations Population Fund

A group of young girls in school uniforms and headscarves, looking somber and weary. The girls are wearing light-colored headscarves and brown school uniforms. They are standing in a line, and their expressions are serious and concerned. The background is slightly blurred, showing more girls in the same attire.

REPUBLIC OF YEMEN

Ongoing conflict in Yemen has destroyed health facilities and increased risks for women and girls. Amidst the security challenges, UNFPA and partners focus efforts on reproductive health services, and prevention and response to gender-based violence.

© UNRC Yemen - Tamem Mofadel Al-Abarh - Al Hadaydah

FOREWORD OF THE EXECUTIVE DIRECTOR

Today more than 75 per cent of people affected by humanitarian crises are women and children. And adolescents aged 10-19 years constitute a significant proportion of the population in many conflict and post-conflict settings.

One of them is 17-year-old Victoria who fled Syria, got married when she was 16, and now cares for her new baby in a refugee camp in Jordan.

She remembers being 13-years-old and doing really well in school when the war started. "We had no worries," she told us. "Our only thought was to continue education until we achieved our goals of becoming whatever we wanted to be...doctors, teachers. Life was normal."

For Victoria and millions of other women and girls caught in crises, the new normal they face can be frightening, and even deadly. Women and girls face increased risk of gender-based violence, including sexual violence; trafficking and child marriage; and of dying during pregnancy and childbirth.

Every day, news reports remind us of the magnitude of the suffering, and the rising needs that must be met. From protracted crises to increasing natural disasters, including due to climate change, we are witnessing forced displacement on a scale not seen since the Second World War.

Victoria was lucky, she delivered a healthy baby boy in a UNFPA-supported clinic in the Zaatari camp. She received quality health services in her time of need. More than 5000 babies have been born in the clinic, without a single maternal death.

When we assume shared responsibility for humanity, we save lives and build hope for the future.

In response to today's humanitarian challenges, UNFPA continues to provide life-saving services to prevent and respond to gender-based violence (GBV) and provide information, services and supplies for sexual and reproductive health (SRH).

Our focus goes beyond meeting immediate needs to reducing risk, building peace, strengthening resilience and supporting long-term development.

This is especially important as countries and the international community work to deliver the Sustainable Development Goals (SDGs). To meet these goals we must reach women, girls and young people living in countries affected by crisis.

Every day, from Afghanistan to the Central African Republic, Iraq, Myanmar, the Syrian Arab Republic, Ukraine and Yemen, UNFPA and our partners are working to meet the needs of women, girls and young people in emergencies, and to support their leadership to achieve lasting and sustainable results.



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When a massive 7.8 magnitude earthquake struck Nepal, UNFPA quickly responded. Medical equipment and reproductive health kits were delivered to more than 200 health facilities, benefiting about 150,000 people. Reproductive health and GBV services reached 105,000 affected people, mostly women and girls.

In Iraq, UNFPA and partners established 19 reproductive health clinics in refugee and IDP camps, 56 primary healthcare centers and 32 referral health facilities in host communities providing 395,463 women with reproductive health services. More than 55,000 displaced women received dignity kits and were connected to social services. And 54 women's centers provided psychosocial support and other services to 150,154 women and girls.

These are just a few examples of the many ways we are working with partners to reach women, girls and young people in crisis. But so much more needs to be done. With rising needs, we need rising support.

The death of more than 500 women every day from complications of pregnancy and childbirth in humanitarian and fragile contexts, and persistent high levels of gender-based violence, testify to the need for stronger collective action.

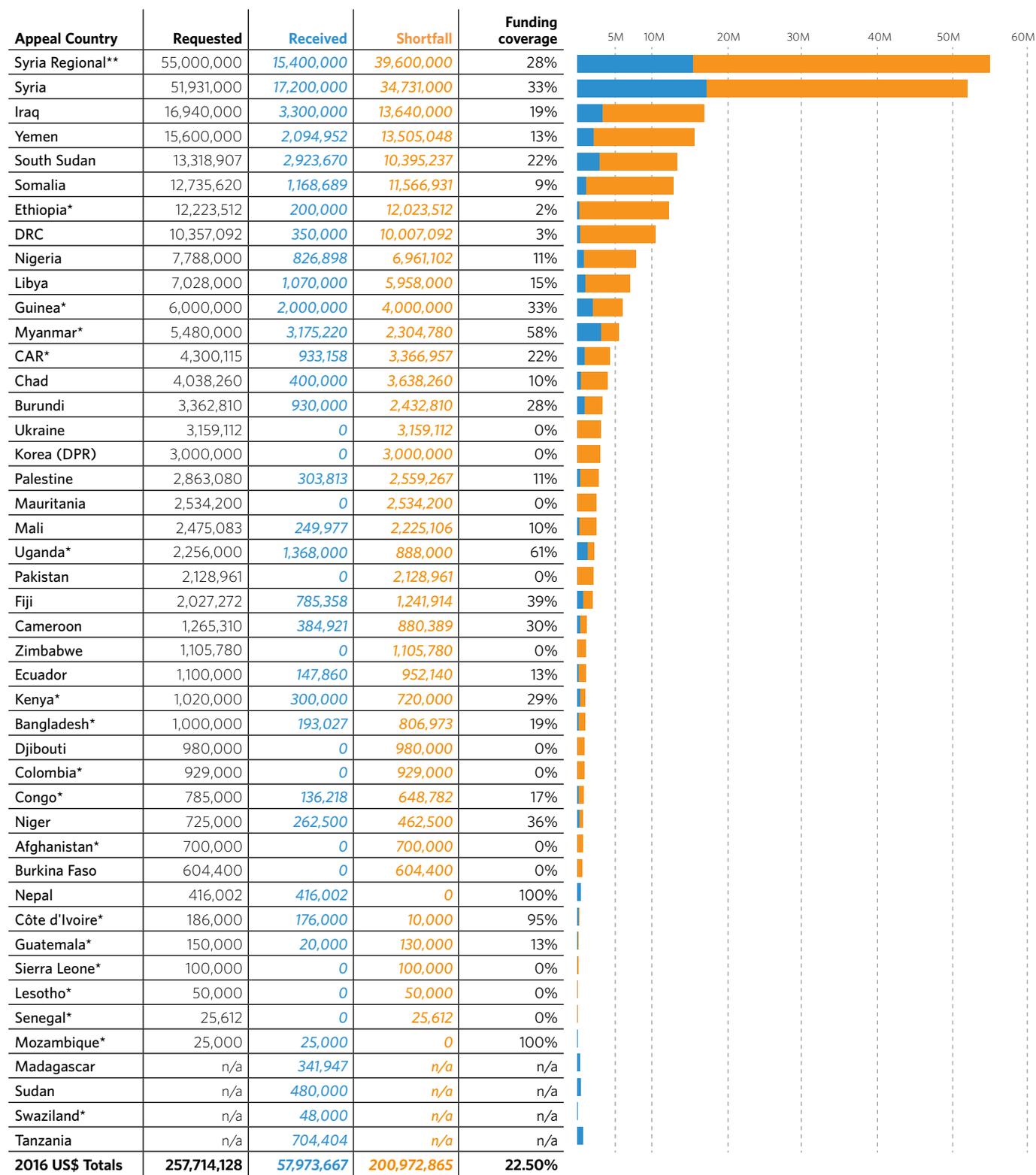
Together we can make a positive difference. Strong commitments made at the World Humanitarian Summit will pave the way forward and strengthen our investment in humanity.

By investing in women, girls and young people we will accelerate progress towards the achievement of the Sustainable Development Goals, strengthen prospects for peace and security, and transform humanitarian action. We will build a better future for all.

Babatunde Osotimehin
Executive Director of UNFPA

2016 FUNDING REQUIRED

As of 23 April 2016



* Figures reported by UNFPA Country Offices

** Syria Regional Refugee and Resilience Plan (Egypt, Iraq, Jordan, Lebanon, and Turkey)

Note: This 2016 data represents humanitarian funding as documented on the OCHA Financial Tracking System (FTS), and reported by UNFPA country offices, as of 23 April 2016. Assistance in Tanzania is to provide emergency basic health services in support of Burundian refugees.

2016 RESULTS PLANNED

GRAND TOTAL:



US\$ 258 million

TO REACH:



40 million people

INCLUDING:



Over 6 million pregnant women

IN:



48 countries



SYRIA

Syrian woman and child coming from a training session at a women's centre. UNFPA's response to the Syria crisis focuses on ensuring reproductive health and promoting safe motherhood; protecting women from gender-based violence and providing a comprehensive response; and empowering women, adolescent girls and young people.

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HUMANITARIAN ACTION

UNFPA 2016 COUNTRIES REQUIRING FUNDING



UKRAINE

Some 3.7 million people are affected by the conflict, including 690,750 women of reproductive age, 26,000 of whom are pregnant. UNFPA reaches out with services to prevent and respond to gender-based violence and protect women's health and dignity.



SYRIA AND THE SUB-REGION

Past its fifth year, the conflict in Syria continues to devastate the country, displacing millions of people. In Syria and neighboring countries there are 5 million women of reproductive age, 430,000 of whom are pregnant.

NIGERIA

In northeastern Nigeria, the Boko Haram insurgency has caused much destruction, loss and suffering, affecting the population, including 54,000 women and girls of reproductive age of whom 24,000 are pregnant. UNFPA and partners support women and girls with safe spaces and health and protection services including psychosocial counselling.



SOUTH SUDAN

The protracted crisis causes devastation, leaving more than 5 million people in need of humanitarian aid, including nearly 1.2 million women and girls of reproductive age, 188,000 of whom are pregnant.



IRAQ

Ongoing violence has displaced more than 3 million people, and Iraq also hosts Syrian refugees. Among those affected are 900,000 women and girls of reproductive age, 124,000 of whom are pregnant. UNFPA reached 400,000 affected people in 2015.



AFGHANISTAN

The protracted conflict has left millions in need of humanitarian aid, including 230,000 women of reproductive age, 40,000 of whom are pregnant. UNFPA supports reproductive health, and prevention and response to gender-based violence and child marriage.



FIJI

Cyclone Winston and Cyclone Zena damaged health facilities and affected 350,000 people including 87,500 women of reproductive age, 17,500 of whom were pregnant. UNFPA supports reproductive health services and supplies, mobile clinics, and prevention and response to gender-based violence, including women friendly spaces



REPUBLIC OF YEMEN

Some 3.7 million people are affected by the conflict, including 690,750 women of reproductive age, 26,000 of whom are pregnant. UNFPA reaches out with services to prevent and respond to gender-based violence and protect women's health and dignity.



MYANMAR

Amidst response, recovery and transition, UNFPA supports reproductive health and prevention and response to GBV and HIV for affected populations including 112,700 women of reproductive age, 48,000 of whom are pregnant.



2015 RESULTS ACHIEVED



543

Number of Maternity/tents/homes operationalized with UNFPA support in 16 countries



751

Number of mobile clinics supported by UNFPA in 23 countries



9 million

Estimated number of affected population reached with SRH and GBV services in humanitarian settings in 34 countries*



430

Number of safe spaces supported by UNFPA in 33 countries**



* includes services for pregnancy, postpartum care, safe deliveries, STI/HIV prevention, Contraceptives, clinical management of rape

**includes women's and girls' spaces, and youth spaces

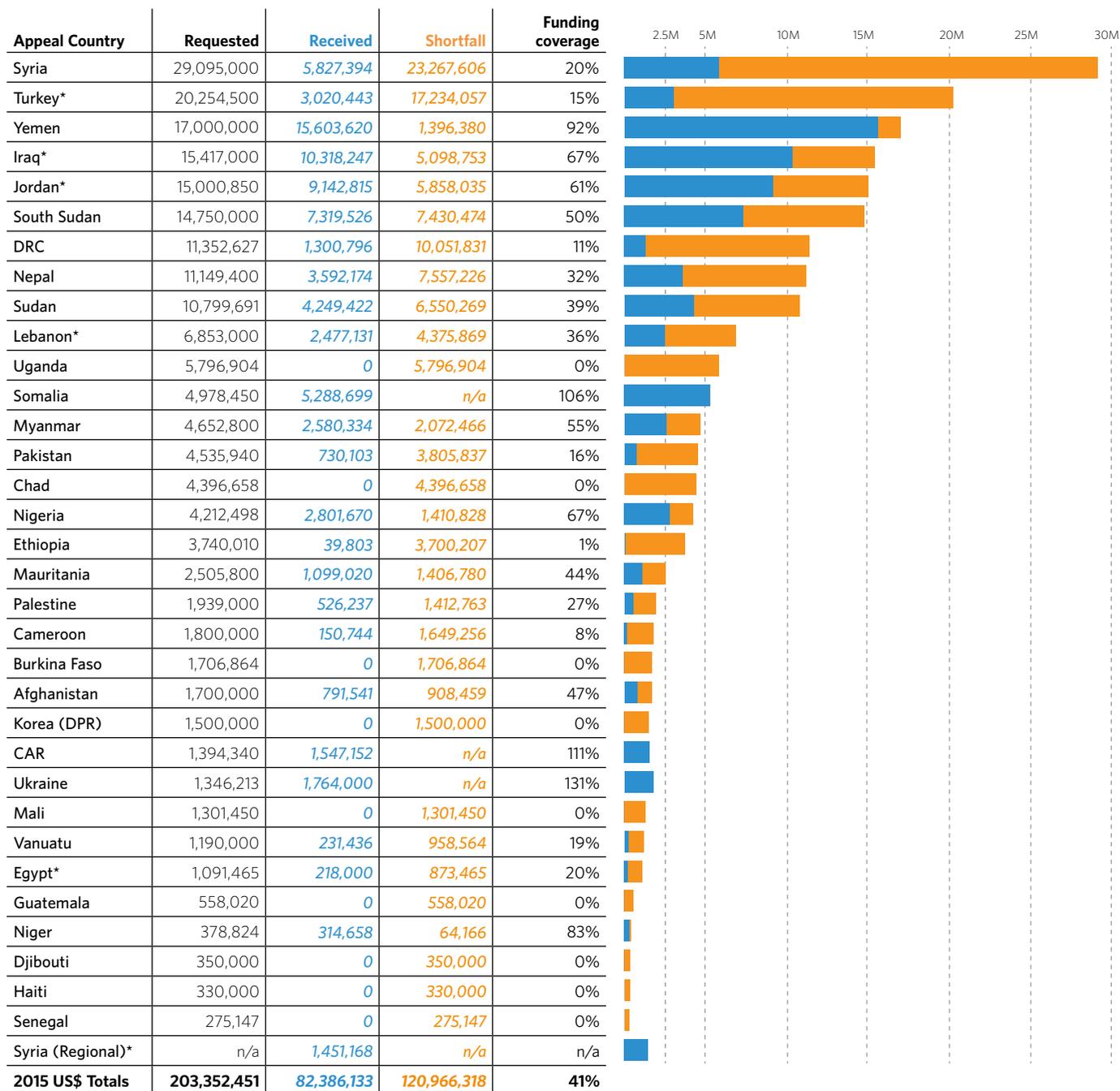
NEPAL

When a massive earthquake struck Nepal on 25 April 2015, it devastated parts of the country, leaving 2.8 million people in need of services and protection, including nearly 2 million women and girls of reproductive age, 175,000 of whom were pregnant. UNFPA delivered medical equipment, drugs and supplies to more than 200 health facilities. Fourteen female friendly spaces provided support to more than 100,000 women and adolescent girls. More than 200 health providers were trained in clinical management of rape, and hundreds of youth volunteers reached out to share information.

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2015 HUMANITARIAN FUNDING



* Syria regional refugee and resilience plan covering Egypt, Iraq, Jordan, Lebanon and Turkey. Please note that Iraq figure includes response to both Iraqi and Syrian affected populations.

Note: This 2015 data represents funding appeals and funding received through the Humanitarian Response Plans and Regional Refugee and Resilience Plan for Syria.

GLOBAL SUPPORT FOR UNFPA HUMANITARIAN ACTION

Humanitarian action in UNFPA focuses on ensuring access to sexual and reproductive health (SRH) services; preventing and responding to gender-based violence (GBV); and empowering women, adolescent girls and young people. Efforts are designed to strengthen capacity, deliver a timely and effective response, and build resilience as part of a continuum of humanitarian and development planning and programming.

GLOBAL SUPPORT TO THE FIELD IN 2015

In 2015, UNFPA responded to major emergencies including the Ebola virus outbreak in West Africa, and ongoing conflicts in the Central African Republic, Iraq, South Sudan, the Syrian Arab Republic and Yemen. Support was also provided to other countries in response to emergencies and for emergency preparedness.

Throughout the year, UNFPA's global support resulted in several achievements:

- ▶ UNFPA's capacity to deploy skilled staff to emergencies was strengthened by expanding the internal surge roster with more than 100 staff trained in 2015, and through enhanced partnerships and external stand-by rosters.
- ▶ A total of \$US 6.6 million worth of reproductive health kits—to ensure emergency obstetric and newborn care, prenatal and postnatal care, clinical management of rape, contraceptive choice, and prevention and treatment of sexually transmitted infections, were dispatched to the field to respond to emergency needs of affected populations.



Health and hygiene supplies being packed to meet needs of refugees and migrants along Balkan route in Europe.

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- ▶ To improve preparedness, response and accountability measures, countries benefited from the global roll-out and revision of UNFPA's guidance on Minimum Preparedness.
- ▶ The UNFPA Emergency Fund supported rapid response by 25 field offices with a disbursement of 31 grants totaling US\$ 4.93 million.

- ▶ New programme guidance—a Toolkit for Sexual and Reproductive Health for Urban Refugees, and Minimum Standards to Prevent and Respond to Gender-based Violence in Emergencies—provided support for evidence-based programming to meet the needs of affected populations.
- ▶ UNFPA's logistical capacity was strengthened. The number of countries with a functional logistical management information system increased from 75 in 2013 to 97 in 2015.
- ▶ UNFPA strengthened risk analysis. Of the 27 UNFPA country programmes developed in 2015, 23 incorporate risk analysis.

MOVING FORWARD

The year 2016 marks a turning point for international humanitarian action. UNFPA will move forward with commitments made at the World Humanitarian Summit to ensure transformative humanitarian action for women, girls and young people.

Focus will be placed on further strengthening preparedness, local and national ownership and institutional capacity, data and evidence-based advocacy and policy support.

To effectively deliver sustained results, UNFPA will strengthen capacity and systems to increase access to sexual and reproductive health services and to effectively address GBV in humanitarian settings. Efforts will be undertaken to roll-out the new GBV minimum standards and GBV information management systems, support implementation of the IASC GBV Guidelines, and lead GBV coordination globally and at field level.

Minimum standards to guide adolescent sexual and reproductive health programming in emergency settings will be produced based on field experience, case studies and a review of global literature. UNFPA and partners will revise the *Inter-agency Working Group Field Manual on Reproductive Health in Humanitarian Settings* to reflect new developments, continue to roll out the SRH toolkit for reproductive health for refugees in urban settings, and further strengthen the SRH surge roster.

UNFPA will institutionalize a surge system and further develop tools to improve forecasting capacity for reproductive health supplies in humanitarian and fragile contexts.

Results reporting, communications and knowledge sharing will be enhanced. Risk informed programming will be improved to incorporate vulnerability analysis in programme and project design, implementation and monitoring processes.



Delivering a world where
every pregnancy is wanted
every childbirth is safe and
every young person's
potential is fulfilled

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Cover photo: Syria and sub-region: Syrian refugee in
Domiz camp in Dohuk, Iraq. © UNFPA

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