

IPPF: Providing Abortion in Challenging Settings

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Context

- Increasing number of people globally live in areas badly affected by conflict, natural disasters, and other fragile humanitarian settings
- Over the past decade there have been an estimated 51 million new and existing internally displaced people, and the number of refugees has doubled to 20 million
- Disproportionate impact on women and girls, additionally at risk for SGBV, unwanted pregnancy and unsafe abortion
- Abortion is a priority area of the Minimum Service Package (MISP) of Sexual and Reproductive Health in Crisis settings, the minimum life-saving sexual and reproductive health services to provide at the onset of an emergency.

IPPF Humanitarian Work

- IPPF Member Associations are established, national organizations and therefore well placed to respond to the needs of women and girls in crisis settings.
- IPPF's humanitarian programme is in a unique position to respond to the needs of women and girls in crisis settings as our Member Associations are established, local, autonomous organizations.
- IPPF Humanitarian Program:
 - Promoting localized humanitarian action;
 - Ensuring access to lifesaving sexual and reproductive health services, including safe abortion care;
 - Responding to sexual and gender-based violence in emergencies
 - Responding to the intersection of the climate crisis and sexual and reproductive healthcare
- IPPF Member Associations provide abortion care and post-abortion care in a wide range of social, legal and political settings.
- Providing abortion care in complex social/legal situations in stable times has meant they are often well-placed to do so during emergencies and in humanitarian settings.
- In 2021, IPPF and our MAs responded to crises in 42 countries across acute and protracted settings, reaching 6.1m humanitarian clients with SRH services.

Key Challenges

- Weakened health systems/ infrastructure
- Overburdened health workforce
- Limited mobility of affected populations
- Restrictive legal and social environments for abortion care – challenging in stable times, can make it impossible in crisis situations.
- Unique needs of humanitarian populations

Good Practice Solutions

- Humanitarian preparedness – having quality, person-centred abortion services during stable times is essential for a strong framework to provide abortion in humanitarian settings
- Advocacy to ensure that abortion care is available and accessible in humanitarian settings, including removing non-evidence based policies and providing flexibility in humanitarian settings.
- Preposition Inter Agency Reproductive Health (IARH) kits, including Kit 8 which includes medical abortion and MVA Kits to ensure access to essential abortion equipment and supplies
- Coordination with humanitarian coordination bodies (SRH cluster or equivalent)
- Adaptation of service models to ensure the best reach and meet the needs of people in humanitarian settings, including during emergency response (ie mobile clinics or outreach camps, support services for medical abortion self-care).
- Task sharing to a range of health workers to ensure adequate skilled health workers are available.
- Integration of complementary services and support for related SRH needs, including for SGBV and contraception, and establish strong referral networks if necessary.

Case Studies

- Pakistan - Rahnuma-FPAP responded to the devastating floods in Pakistan in 2022.
 - Provided 16,096 women and girls in flood-affected districts with post-abortion care and contraception
 - Integration of post-abortion care within clinics in their humanitarian response network in the disaster-prone areas of Pakistan helped prepare for and strengthen service delivery.
- Sudan - SFPA runs clinics in two camps for Ethiopian refugees in Sudan, and continues to respond to protracted humanitarian settings.
 - Refugee camp - Built a minor operation room at the Tunaydbah camp clinic to provide MVA for treatment of incomplete abortion and miscarriage. Building a referral network of community health workers to facilitate access to care
 - Protracted setting - The Abu Shouk clinic provides integrated SRH services including abortion care and contraception to internally displaced populations in the Darfur region. Recently added a specialized service for SGBV to improve support for survivors.
- Ethiopia - FGAE clinics in conflict-affected areas provide abortion care as part of an integrated package of SRH services
 - Throughout 2022, restored clinics to previous capacity following damage and looting, with majority now providing services at full capacity.
 - Works closely with government health workers and service providers to refer clients to FGAE for services, including abortion care.
 - Built the capacity of public and private health facilities to provide quality contraceptive and abortion care