

Scenarios for implementing the MISP

1. *You are a health worker based in a camp for internally displaced persons. A woman presents to you at the health facility and says she was raped while gathering firewood outside the perimeter of the camp. How would you address her needs?*

First, you should assure her that this was not her fault and that she did not deserve to have this happen to her. Provide her with information about her right to receive care and what these services entail. If she accepts care, provide her with services as outlined in the *Clinical Management of Rape Survivors*¹⁰⁰ or another standard protocol for rape survivors (Médecins Sans Frontières, MOH, etc.) without delay. If the woman agrees, the incident should be reported to the protection officer in the camp in order to ensure her immediate safety. The woman should also be offered psychosocial services that are offered by the community services sector. Ensure that confidentiality is maintained throughout this process and do not do anything that the survivor does not consent to.

It is also important to work with all organizations in the camp to find out how to prevent future rapes. Your team may consider identifying alternative fuel sources so the community is not dependent on wood for fuel, organizing armed or protective escorts to gather wood to increase safety, obtaining/producing fuel-efficient cook stoves or discussing the possibility of changing the type of rations that are provided to a kind that does not require long cooking times.


2. *You have been hired by UNFPA as the RH Coordinator in a region that received an influx of refugees from a neighboring country two days ago. What are some of the first steps you should take?*

Call a meeting with all of the implementing partners of UNFPA as well as other local or national agencies that are responding to the needs of the refugees. During the meeting, you will identify which organizations already have an RH Coordinator/Focal Point in place and which ones still need to make RH a priority. This meeting also provides the opportunity to facilitate ordering supplies for the agencies and initiate a plan for monitoring and sharing data on mortality, births, etc.

3. *You are a newly arrived supervisor at a camp-level health facility. You notice that your staff members do not use gloves or wear protective clothing and there is an open waste pit of used medical supplies, including needles, behind the health center. How would you address these concerns?*

Conduct a refresher lesson for all health center staff on respect for universal precautions and ensure that necessary supplies are available by taking an inventory and ordering materials that are lacking. Also, during the session you can work with staff to develop a system to self-monitor compliance with cleaning, disinfection and sterilization of equipment and supplies and to identify staff responsible for daily medical waste management, such as burning or burying refuse in a protected pit specifically for medical waste. If staff feel overwhelmed and feel that they don't have time to ensure adherence to universal precautions, you can determine whether more staff are needed, if it is possible to hire more staff, or help staff determine how to prioritize adherence to universal precautions over other tasks that may be less important. Ultimately, most trained health workers should be aware how basic and critical universal precautions are and understand the principle of preventing the transmission of infections in the healthcare setting. Therefore, it may be sufficient to remind and support staff in any way necessary to ensure universal precautions are respected.

¹⁰⁰ www.who.int/reproductive-health/publications/clinical_mngt_survivors_of_rape/clinical_mngt_survivors_of_rape.pdf

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4. *You are a health worker in a remote area. Due to the ongoing conflict in the local area, you and your colleagues leave the camp at 4 p.m. to arrive back in your living quarters before dark and the time of the imposed curfew. The night before, a young woman went into labor early in the morning before your staff arrived at the camp at 9 a.m. She had an obstructed labor and needed to get to the referral health facility to have a cesarean section. Luckily, she reached the referral facility in time to have a safe birth. What would you do now to prevent another pregnant woman from being stranded without transport at the camp in the future?*

It may be necessary to negotiate emergency transport with security personnel, camp managers and other relevant actors. If it is deemed within security protocol, one alternative is to find out if any people in the local area have a vehicle they would be willing to use to transport women from the camp to the health facility. This individual could be registered with camp security to travel at night. A radio communication system could be set up in the camp health center to link with the local person who could be immediately alerted when a woman needed to get transported to the referral health facility. Alternatively, another vehicle could be procured that would stay at the health center in camp overnight so that women could be transported directly from there when she presents at any time of the day or night.

5. *You've arrived in a crisis setting and are in charge of getting RH supplies in place. What are your first steps?*

Do a quick situation analysis to find out the total population, how many and what type of personnel are working in this setting, where and in what condition the referral facility is and whether there is a country-level UNFPA office. You can use this information to determine essential resources needed, including personnel, supplies and equipment. It is best to anticipate these needs prior to an emergency and include appropriately trained personnel in your emergency staff rosters and supplies and equipment in your medical supply procurement orders. You can also work with UNFPA, at the country office or the New York or Geneva office, to determine the kits to be ordered and how to finance the purchase through your organization.

6. *You've been working in a camp for four months where a steady influx of refugees from the conflict in the neighboring country had ended one month ago and all components of the MISIP are well established. At the most recent health coordination meeting, it was reported that the crude mortality rate had stabilized at less than 1/10,000 population per day and that the number of refugees registering has dramatically declined. What do you do now that the situation seems to be reaching a more stable phase?*

Use the data that you have collected on maternal, infant and child mortality, HIV prevalence and contraceptive prevalence to determine what additional RH services would be suited to this population. Determine whether the sites identified for expanded RH services remain suitable in terms of security, accessibility, privacy and confidentiality during visits, access to water and sanitation, adequate room for patients to wait and where sufficient provisions can be made for health workers to maintain aseptic conditions. Begin training staff on the needs that have been identified during the past three months. Review supply needs to see what orders can now be made through normal procurement channels to supplement the inventory that has been ordered through Interagency RH Kits.