



Supporting Access to Family Planning and Post-Abortion Care in Crisis Settings (SAFPAC)

About SAFPAC

Helping women, girls, and their partners achieve their rights to sexual and reproductive health (SRH), including the right to choose if, when, and how often to get pregnant is central to CARE's mission to reduce poverty and promote social justice. In times of crisis, the need for life-saving sexual and reproductive health (SRH) services does not go away for women and girls. Indeed, the needs often increase due to inadequate access to health services, safe drinking water, sanitation, and nutrition; a breakdown in social structures and norms; insecurity, violence, and psychological trauma.

CARE's Supporting Access to Family Planning and Post Abortion Care (SAFPAC) initiative aims to reduce unintended pregnancies and deaths from unsafe abortion by increasing access to:

- Quality family planning, safe abortion, and post-abortion care services for women and girls in settings of **protracted or chronic crisis**
- SRH services, including family planning and emergency obstetric and neonatal care, during **acute humanitarian emergencies**

STRATEGY

Protracted and Chronic Crises

SAFPAC strengthens government health systems that have been weakened by protracted or chronic crisis to deliver high-quality, comprehensive family planning (with an emphasis on long-acting reversible methods), safe abortion, and post-abortion care services that do not discriminate based on age, marital status, or parity. Our core approaches include:

- **Building providers' clinical and counseling skills** through competency-based training, follow-up clinical assessment and coaching;
- Supporting health providers and officials to make timely and evidence-based decisions for **continuous program quality improvement**;
- Ensuring that health centers have the **right supplies at the right time in the right quantities** to ensure method choice and prevent service interruption;
- Raising community awareness of sexual and reproductive health rights and engaging them to **change social and gender norms** that block women's and girls' access to services.

Program Name:

Supporting Access to Family Planning and Post-Abortion Care in Crisis Settings (SAFPAC)

Program Countries:

Chad, Democratic Republic of Congo, Mali, Syria, Afghanistan, Bangladesh, Cambodia, Cameroon, Djibouti, Myanmar, Nepal, Niger, Nigeria, South Sudan, Uganda, Ivory Coast and the Philippines.

Timeframe: 2011-2018

Budget: US\$ 51.1 million

Donor: Anonymous

Participants:

- **232,365** new family planning (FP) users
- **70%** new FP users chose a long-acting or permanent method
- **11,436** post-abortion care (PAC) clients
- **68%** PAC clients chose a long-acting or permanent method



In Chad, many women would like to prevent pregnancy but are not currently using a contraceptive method. Through SAFPAC, CARE helped to increase women's and girls' access to the most effective contraceptive methods that are still reversible – the intra-uterine device (IUD) and implant – by supporting primary health centers to deliver these services. The national policy initially required IUDs and implants to be inserted by doctors at hospitals, but CARE demonstrated that nurses and midwives could safely provide IUD and implant services in primary health centers with the right training and support. Ultimately, the policy was changed, and women and girls can now request them from their primary care providers.

“Adolescent girls and young people have the right to sexual health to make a better future and realize their dreams.”

- SAFPAC participant



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Acute Emergencies

SAFPAC provides funding and technical assistance to CARE country offices to support SRH in emergency preparedness and response. Our core approaches include:

- Ensuring implementation of the **Minimum Initial Service Package for Reproductive Health in Crisis Settings (MISP)** to meet women's and girls' immediate needs in CARE's humanitarian programming
- Strengthening the **readiness and capacity of CARE staff and first line responders** to provide quality SRH services at the onset of a crisis
- Advocating with donors and governments to increase resources for and remove policy barriers to SRH services for women and girls in crisis-affected settings

STRATEGIC PARTNERSHIPS

CARE partners with global organizations with expertise in SRH or emergency response to maximize the reach and impact of our programming. These partners include:

- **UNFPA** to implement the MISP, to build the capacity of staff and first responders on MISP-related skills, and to ensure the availability of contraceptives
- **International Planned Parenthood Federation** to build the capacity of first responders and to leverage IPPF's large network of service delivery providers to increase access to lifesaving SRH services in emergencies
- **US Centers for Disease Control and Prevention** to improve women and girls' access to outbreak response services and SRH services during major disease outbreaks
- **Interagency Working Group for Reproductive Health in Emergencies** to develop authoritative guidance for SRH programming in emergencies

FUTURE DIRECTIONS

SAFPAC aims to grow in scale and scope by including emergency obstetric and neonatal care, the management of sexual violence, and adolescent SRH in the model for protracted and chronic crisis settings, and scaling up the model through institutionalization and replication in select countries.

At the same time, the initiative seeks to improve program quality by linking CARE's emergency and development programming to help communities to recover from crisis and build back better; mainstreaming social accountability approaches to ensure that CARE and humanitarian actors are answerable to communities they serve; collaborating with CARE's Security Unit to conduct initial rapid assessments within 48 hours after a crisis; and creating synergies with CARE's public health emergencies program on community-based surveillance and risk communication.

CARE USA

Ms. Elizabeth Noznesky, Senior Advisor for SRH
enoznesky@care.org

Dr. Jimmy. Nzau, SAFPAC Director
jnzau@care.org

