



IAWG



Reproductive Health Kits

12th IAWG Annual Meeting
Santo Domingo, May 2010



MISP service delivery objectives

- **Manage the consequences of sexual violence**
 - ✓ **medical care for survivors (EC, STI prevention, PEP)**
- **Reduce HIV transmission**
 - ✓ **standard (universal) precautions**
 - ✓ **free condoms**
 - ✓ **safe blood transfusion**
- **Prevent excess neonatal/maternal morbidity & mortality**
 - ✓ **referral for obstetric emergencies**
 - ✓ **clean and safe deliveries at health facility**
 - ✓ **clean home deliveries**

Other important supplies

- **Contraceptives to meet spontaneous demand**
- **Antibiotics to treat people presenting with an STI symptom**

IAWG RH kits for crises

13 Kits:

- **Block 1 (kit 0 to 5)**
Community /health centre level
10 000 people for 3 months
- **Block 2 (Kit 6 to 10)**
Health centre level or referral level hospital
30 000 people for 3 months
- **Block 3 (kit 11 and 12)**
Referral level hospital
150 000 people for 3 months

IA RH kits

Block 1

Community/health centre level
10 000 people for 3 months

Sub-kit

- 0
 - Training and administration
- 1 A & B
 - Condoms (male & female)
- 2 A & B
 - Clean delivery (individual & attendant)
- 3 A & B
 - Post-rape (EC/STI prevention & PEP)
- 4
 - Oral and injectable contraception
- 5
 - STI drugs

IA RH Kits

Block 2

***Health centre level or referral level
30 000 people for 3 months***

Kit

6

- **Delivery (Health Facility)**

7

- **IUD insertion**

8

- **Management of complications of abortion**

9

- **Suture of cervical and vaginal tears**

10

- **Vacuum extraction**

IA RH kits

Block 3

Referral level

150 000 people for 3 months

Kit

11A

- Surgical (reusable equipment)

11B

- Surgical (consumable items and drugs)

12

- Blood transfusion (HIV testing)

Updating IAWG RH Kits

Aim to review every 2 or 3 years...

1. Survey (English and French)

- Covering kit use over previous 2 years
- targets consignees (from procurement records) and “users” (identified by consignees)
- A. Operational – Implementation of MISP, logistics, use of guidelines/IEC materials, training conducted
- B. Technical – Feedback on kit contents

2. Background paper(s) on new technologies

- WHO supported (guidelines, Essential Medicines List)
- Successfully piloted by partner(s)

Updating IAWG RH Kits

- 3. RH Kit review meeting 1999, 2003, 2005, 2010,**
 - IAWG technical focal points:
 - review survey results and background paper(s)
 - make recommendations
 - input from procurement

Since 2005: Consistent with IEHK process

- Same product description (UNICEF)
- Same specifications (UNICEF or MSF)
- Complementary products
- Shared information

Examples of past changes

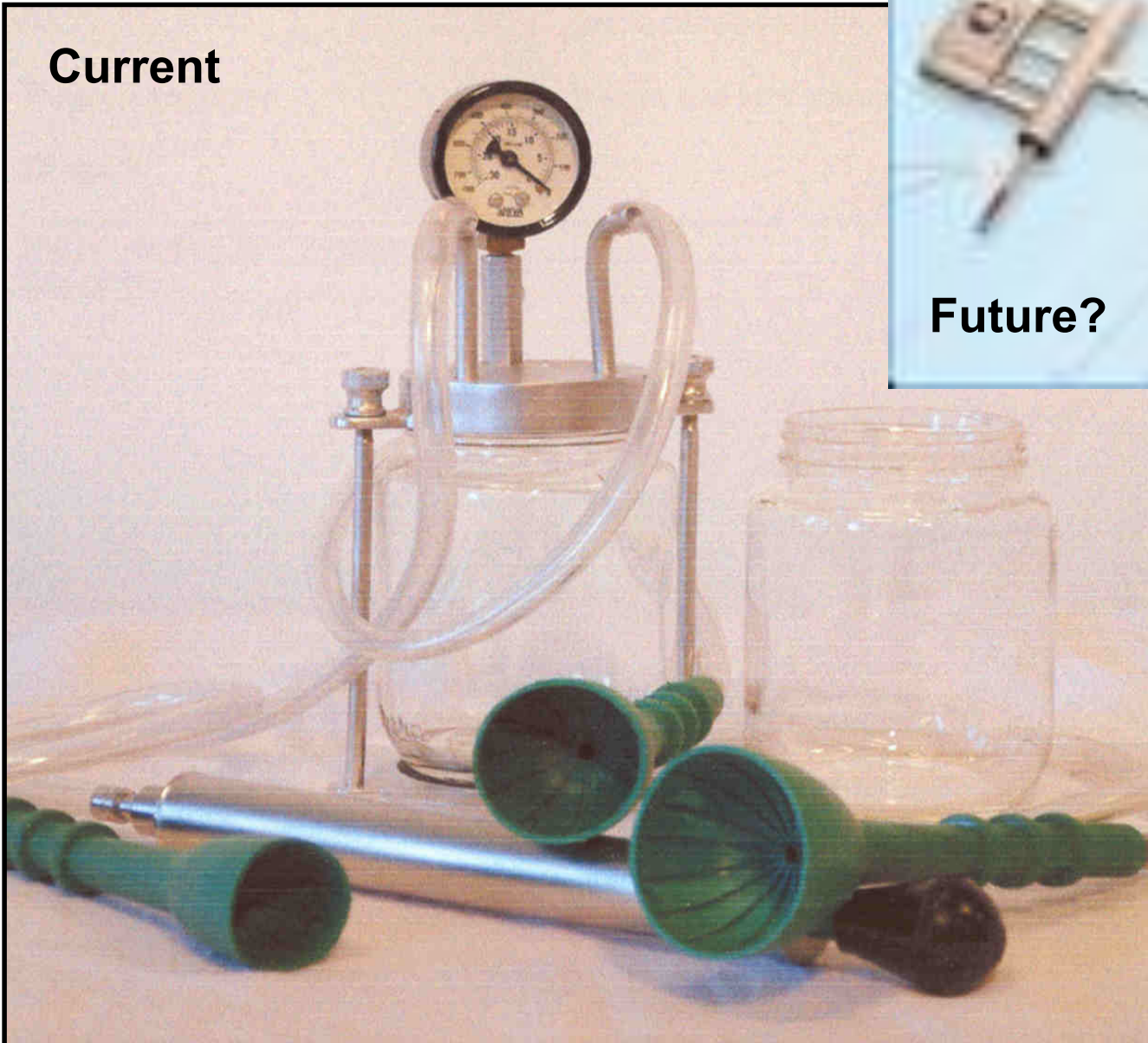
- Female condoms were added in kit 1
- Gloves were added to kit 2A
- PEP was added to kit 3 (post rape)
- Child formulations added to kit 3 and kit 5 (STI)
- Azythromycin replaced doxycycline in kit 5
- MgSO₄ was added in kit 6 (midwife)
- Ibuprofen added to kit 8 (post-abortion care)
- Colour coding was made clearer
- Boxes were made easier to handle and sturdier

Proposed changes in 2010 revision

- **Kit 2: add cord clamp?**
- **Kit 3 A and B become 1 kit?**
- **Kit 6:**
 - Split into **6A: reusable items** & **6B: consumable items?**
 - Add a neonatal resuscitator (ambu-bag)?
 - Add Misoprostol to manage PPH?
 - Add a doppler?
 - Add survival blankets for neonates?
- **Kit 8: Add misoprostol for PAC?**
- **Kit 10: replace with hand-held device?**
- **Make a RH Field Library kit?**

Kit 10: Vacuum Extraction for Delivery

Current



Future?



Next steps

- **RH Kit review meeting June 2010**
 - Online questionnaire on proposed changes
 - Teleconference
- **Write specifications**
- **Rewrite and translate RH kit booklet**
- **Procurement gets bids**
- **Updated kits available**