



## UNFPA INTERVENTIONS IN RESPONSE TO THE COVID-19

### Rights and Choices for Sexual and Reproductive Health and Rights even during COVID19: an emergency

In times of crisis like that of the COVID-19 pandemic, the risk of maternal and newborn mortality is higher. Urgent interventions in this domain can make the difference between life and death for pregnant mothers and their newborns

Pregnant and lactating mothers as well as health personnel who assist them to deliver under good conditions (so that no woman should die while giving life) such as midwives, nurses, doctors and anesthetists must be at the center of all response efforts.

Even through the adverse effects of COVID-19 on pregnant women, breastfeeding mothers, women and girls of reproductive age are not well known, the physical and immune system changes which occur during pregnancy are well documented and constitute vulnerability factors.

Negative maternal and neonatal outcomes are uncertain and mostly limited to infection during the third trimester of pregnancy with reported cases of premature rupture of membranes, fetal distress and premature births.

Pregnant women with respiratory conditions must be treated as emergencies and with utmost rigor because of heightened risks of unfavorable obstetric outcomes.

Low risk pregnancy and safe deliveries are a result of functional health systems with 24/7 hours' access and strict observance of infection prevention and control measures.

Prenatal care, maternities and new born health care services must be separated from suspected or diagnosed cases of COVID-19.

Family planning including other sexual and reproductive health services and menstrual hygiene products are at the heart of health, women empowerment and protection and could be seriously impacted when supply chains undergo pressures linked to response to pandemics.

Moreover, women represent a considerable work force especially midwives and need very special attention and care. As front line health workers, they must work under favorable and protected conditions and working environment.

The continuum of health care must be ensured and pregnant women should carry out prenatal consultations under conditions with the least risk of transmission of COVID-19.



### Synergy in actions with other prevention and response stakeholders

UNFPA is engaged in the fight against COVID-19 alongside the Ministry of Health, WHO and all stakeholders within the framework of implementation of the national response plan through 4 pillars namely; (1) prevention, infection control and biosecurity, (2) psychosocial care, (3) risk communication,

community engagement and logistics (4) research to better understand the impact of coronavirus on pregnancy and the influence of pregnancy on COVID-19. While remaining focused on its three transformative results, her key actions.



## Our main interventions



### With respect to zero preventable maternal deaths

- Communication on protection and prevention measures in collaboration with the Ministry of Health (PNSR), National Midwifery Association of Congo (SCOSAF), and other partners;
- Infection Prevention and Control (IPC) in 50 maternities in Kinshasa (provision of IPC kits, training and deployment of a pool of midwives for supportive supervision in the maternities with SCOSAF and humanitarian midwives);
- Provision of individual clean delivery kits, individual protective material (PPE) for midwives, nurses, doctors and anesthetists in the 50 maternities to ensure safe deliveries;
- Render COVID-19 treatment centers gender sensitive and pregnant women friendly (for example through the provision of dignity kits);
- Conduct a study on COVID-19 and pregnancy with INRB.



### With respect to Zero GBV

- Communication on protection and prevention measures in collaboration with the Ministry of Gender, Family and the Child, Association of female leaders and activists on violence against women, One stop Centers for the holistic management of rape and HEFORSHE champions;
- Ensure zero stock out for Emergency RH Kit 3 (post rape) and dignity kits for every woman who consults in the One Stop Center;
- Infection Prevention and Control (IPC) in the One Stop Centers in collaboration with Ministry of Gender, Family and the Child, UNDP, and all partners including in humanitarian settings.



### With respect to zero unmet need for Family Planning

- Communication on protection and prevention measures in collaboration with the Ministry of Health (PNSR), National Midwifery Association of Congo (SCOSAF), and other partners;
- Ensure zero stock out of FP commodities in service deliver points including Kitumaini health centers which are adapted to the needs of youths;
- Provide PPE to community based distributors of FP (final year midwifery, nursing and medical students) and selected community health workers;
- Community distribution (using MoH guidelines) in collaboration with implementing partners including in humanitarian settings.



### With the National Technical Secretariat COVID-19

- With the National Technical Secretariat COVID-19 Institutional support;
- Delivery of the 2 mobile clinics (Ambulances) for follow-up of contacts, evacuation of bedridden patients, awareness campaigns, inter-hospital transport of inputs for the care of COVID-19.

## LET US RESPECT BARRIER GESTURES



### With respect to youths

- Communication with youth on barrier gestures;
- Actors of change and contributors in the community distribution of condoms (ADBC).



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