

## Minimum Initial Service Package (MISP)<sup>1</sup>

### Objectives of the MISP

- **ENSURE** the health sector/cluster identifies an organization to lead implementation of the MISP. The lead RH organization:
  - nominates an RH officer to provide technical and operational support to all agencies providing health services
  - hosts regular stakeholder meetings to facilitate implementation of the MISP
  - reports back to the health sector/cluster meetings on any issues related to MISP implementation
  - shares information about the availability of RH resources and supplies
- **PREVENT AND MANAGE** the consequences of sexual violence:
  - Put in place measures to protect affected populations, particularly women and girls, from sexual violence
  - Make clinical care available for survivors of rape
  - Ensure the community is aware of the available clinical services
- **REDUCE** HIV transmission:
  - Ensure safe blood transfusion practice
  - Facilitate and enforce respect for standard precautions
  - Make free condoms available
- **PREVENT** excess maternal and newborn morbidity and mortality:
  - Ensure availability of emergency obstetric care (EmOC) and newborn care services, including:
    - At health facilities: skilled birth attendants and supplies for normal births and management of obstetric and newborn complications
    - At referral hospitals: skilled medical staff and supplies for management of obstetric and newborn emergencies
  - Establish a referral system to facilitate transport and communication from the community to the health centre and between health centre and hospital
  - Provide clean delivery kits to visibly pregnant women and birth attendants to promote clean home deliveries when access to a health facility is not possible
- **PLAN** for comprehensive RH services, integrated into primary health care (PHC) as the situation permits. Support the health sector/cluster partners to:
  - Coordinate ordering RH equipment and supplies based on estimated and observed consumption
  - Collect existing background data
  - Identify suitable sites for future service delivery of comprehensive RH services
  - Assess staff capacity to provide comprehensive RH services and plan for training/retraining of staff

**Note – additional priorities:** It is also important to ensure contraceptives are available to meet the demand, syndromic treatment of STIs is available to patients presenting with symptoms and antiretrovirals (ARVs) are available to continue treatment for people already on ARVs, including for prevention of mother-to-child transmission (PMTCT). In addition, ensure that culturally appropriate menstrual protection materials (usually packed with other toiletries in “hygiene kits”) are distributed to women and girls.

<sup>1</sup> The MISP is based on the Inter-agency Field Manual on Reproductive Health in Humanitarian Settings: 2010 Revision for Field Review. Please note that the Inter-agency Field Manual is currently under revision including to the MISP chapter.