



GUIDELINES¹ ON FPRH DURING COVID-19 IN SINDH

Department of Health (DoH) & Population Welfare Department, Government of Sindh

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¹ The Guidelines have been developed by the **CIP Secretariat, Population Welfare Department (PWD)**, Karachi. The Guidelines have been prepared based on Advisories issued by **Department of Health; PWD; PPHI; technical support from partners i.e. UNFPA, BMGF, DAFPAC; Pathfinder International, Jhpiego**. Furthermore, several documents were also reviewed for the purpose including Sindh RH Act, 2019; Inter-Agency Working Group on Reproductive Health in Crisis; "Gender Implications of COVID-19 Outbreaks..." by Care (www.careinternational.org.uk); COVID-19 Outbreak: Fall Out for SRHR by Guttmacher Institute (www.guttmacher.org); Corona virus will affect global access to contraceptives by Christopher PurdyFollow, President, DKT International (www.dktinternational.org) & interactive map of cases (www.ncov2019.live).

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Note: The Guidelines would be amended in accordance with any new Advisory issued that might requires new SoPs

Background and Rationale

Corona Virus (COVID-19) has transformed into a pandemic affecting 246,737 people across 165 countries with 10,179 deaths. Pakistan has as yet 377 cases with 2 deaths (*www.ncov2019.live as of March 19, 2020*). Since, by now there is no treatment or vaccination against the virus, the effective measures to contain the virus are lock downs, social distancing, screening, use of masks, quarantine and isolation.

COVID-19 is putting enormous pressure on health systems as well as economies. The evidence shows that women and girls suffer more during epidemics since their reproductive health needs become less priority under emergency situation.

Current outbreak in Pakistan has drawn attention towards need for continuity of reproductive health and family planning services for women. In current situation, women are foreseen to have serious mobility issue and will not be able to reach facilities. Disruption in family planning services could be minimized through a) preparedness actions, b) crisis response, and c) coordinated transition back to routine services.

There is every possibility that due to partial lock downs, facilities may face stock out of commodities, health workers being overwhelmed with work regarding Outbreak, resulting into unwanted pregnancies, induced abortions, side effects and issues of infection prevention.

Besides, humanitarian emergencies result into increased domestic violence, vulnerability of adolescents and sexual abuse that would compromise ability of young women to avail RH services.

Based on international experiences and provincial legal frameworks, the Government of Sindh issues Guidelines for service providers engaged in provision of Family Planning and Reproductive Health (FPRH) services.

These Guidelines are in line with recently passed, Sindh Reproductive Healthcare Rights Act, 2019. It is stated in the clause 6 sub clause XII of the Act that “**Minimum Service Package on integrated RH services** shall be prepared and put in place related to disaster/crisis situation”.

The guidelines are based on Safety Measures; integrated FPRH services at health and population welfare facility level; within community; quarantine centers; supply of commodities; and systems strengthening measures.

I. Safety Measures

- Health and Population Welfare district offices will ensure the safety of staff and providers and issue detailed instructions regarding preventive measures they should take while interacting with clients
- Workers must use masks, protective gloves while delivering services to be provided by the district office/facility. Arrangements will be made to provide protective measures (masks) for the clients/patient, where necessary.
- An effective disinfection shall be ensured three times a day to clean surfaces, tables, and equipment and all door knobs under the supervision of facility In-charge

- Crowding of patients and attendants will be discouraged to ensure distance of 1 meter (3 feet)
- Frequent use of hand sanitizers and hand washing will be ensured
- Cover mouth and nose during coughing and sneezing through elbow or a tissue
- Rest of the sections in this Guideline (Sections II, III, IV, V, and VI) are subject to adherence to Section I as per Advisories of the Government of Sindh.

II. Integrated FPRH Services at Health (DoH, PPHI, IHS, HANDS) & PWD Facilities

- All Reproductive Health Services (RHS A) Centers shall remain open to provide short and long acting methods except for surgical methods besides, ANC, PNC and MCH services
- Family Welfare Centers (FWCs) operating within Health facilities of Department of Health shall continue to work, however, In-charge of those FWCs which are situated in densely populated areas will remained accessible to community through phone number provided to registered clients. FWWs will provide short and long acting methods as well as ANC, PNC and MCH services
- All medical OPDs at Department of Health facilities including secondary and tertiary hospitals shall continue to work. However, only one attendant shall be allowed with a patient. The OPDs will provide ANC, PNC, FP services and immunization services.
- PPHI and IHS, HANDS and other organizations managing Department of Health facilities ensure FP services and supplies continue in their facilities as usual with no stock-outs during the next 3 months
- All health facilities with labor rooms should be equipped with PFPF, including job-aids, trained providers and contraceptives (IUD and Implant).
- All facilities will promote FP2020 POOCHO Helpline (0800-11171) to seek information centres and services.
- Poocho Helpline will function as assessing Unmet Need during the Outbreak to inform CIP Secretariat who will coordinate with concerned Department to take possible measures to enhance access to clients.

III. Services within Communities by LHWs, CMWs, CHWs, FWA, Male Mobilizers

- LHWs, CMWs, CHWs, FWA (Male/Female), Social Male Mobilizers (SMM) shall be providing information to community regarding availability of FP services during the crisis period. These workers shall provide services in following manner by visiting clients or at static facilities while observing Advisories on COVID-19:
 - Workers need to reach out the registered users and clients with three methods: Oral pills, condoms and injectable including DMPA SC and IM.
 - Workers should provide users with 2 months of supplies.
 - Workers must note the due date for injectable.
 - Workers must get their cell numbers for future contacts.
 - Workers must ask for newly-wed couples in the neighborhood to be contacted as potential client.

- Workers must ask for women who may be delivering in the next 3-4 weeks.
- Workers must use protective gloves to carry products and deliver services.
- Workers should immediately refer case of IUCD or implants to nearest facility.
- Workers should promote FP2020 Poocho Helpline (0800-11171) for information about FP services and products as well as COVID-19
- FWWs must work with RHS WMOs to ensure provision of post-pregnancy services.
- RHS WMOs must be in constant touch with FWWs.
- District Office shall monitor the performance of all workers.
- Workers must use official ID cards when visiting clients (this is important for permission to meet clients at their residences)

IV. FPRH Services in Quarantine Centers

- Special Family Planning Desks (FP Desks) will be established at Quarantine Centres
- The FP Desks will provide ECP (Emergency Contraceptive Pills) and COCs at Quarantine Centres as most of the women pilgrims take contraceptives to cease their menstruation therefore they might need additional supplies of contraceptive pills both for contraceptives and managing side effects
- ANC, MCH and other required RH services shall be provided to clients at Quarantine Centres

V. Supply of Commodities

- Commodity situation will be assessed frequently in terms of Stocks on Hands; Months of Stock; and Stock-Out at Central Warehouse, Karachi
- A three (3) months stock at District Stores and 2 months stock at each PWD and DoH, PPHI, IHS and other facilities will be maintained all the time. DPWO, DHO and concerned district officer shall ensure availability of contraceptives
- Ensure that menstrual hygiene, obstetric, reproductive, and other primary health care commodities are well-stocked and available at health care facilities

VI. Systems Strengthening; Accountability for Results; and Capacity

- Under the overall guidance of Minister for Health & Population Welfare, a “**FPRH COVID-19 Response Group**” shall be established coordinated by CIP Secretariat/ PWD with flexibility of meetings in terms of safety Advisories so that meetings might take place via video link
- Each district will establish a “**District FPRH COVID-19 Response Group**”, DHO, DPWO, MS, DHQ and a WMO from RHS A shall be members with flexibility of meetings in terms of safety Advisories so that meetings might take place via video link
- CIP Secretariat/ PWD will coordinate FPRH responses by concerned Departments and development partners.

- Development partners would be requested to pool/redirect their existing resources to support in this crisis situation
- District officers/In-charge facilities to orient providers to understand and respond to the impact of the crises on clients (e.g., psychosocial and physical trauma; any myths and misconceptions about COVID-19 versus FPRH services; information on COVID-19; increase in unintended pregnancy; increases in all forms of gender-based violence).
- District Health and Population offices will ensure to continuously send their data to CIP Secretariat besides data from quarantine centers
- Monitoring & Supportive Supervision will continue through alternate means i.e. telephonically, WhatsApp, video link, and occasional visits where needed.
- Monthly meetings of field workers or other such meetings will discontinue for 2 months to
- As the Outbreak situation evolves the Guideline would be revised
