

REGIONAL OVERVIEW

Prepositioning Supplies in Disaster-Prone Countries of Asia and the Pacific

Asia and the Pacific



The most disaster-prone region in the world

Prepositioning reproductive health supplies in areas vulnerable to natural disasters speeds up emergency assistance and saves lives; it also builds resilience in regular supply chains. In 2015, UNFPA established the Regional Prepositioning Initiative with support from Australia's Department of Foreign Affairs and Trade (DFAT). Supplies are procured and stored at hubs in Brisbane, Australia and Suva, Fiji and in strategic locations around the 11 focus countries. In 2018 alone, Australia's support through the initiative made life-saving supplies immediately available in 17 emergency responses across nine countries in Asia and the Pacific. The initiative is managed by the UNFPA Asia-Pacific Regional Office (APRO), which works with UNFPA Country Offices in the region to help governments and civil society partners reduce disaster risk and prepare for and respond to emergencies.

Regional Prepositioning Initiative anticipates essential needs

HUMANITARIAN SITUATION

Asia and the Pacific is the most disaster-prone region in the world. Nearly 45 percent of the world's natural disasters occur in the region, and more than 75 percent of those affected by natural disasters globally live in the region. Although climate change is a huge challenge facing all countries, Pacific Island nations are at particular risk and are being forced to adapt much more quickly to its effects. The region is affected by a number of protracted crises and long-running conflicts that exact a human toll. It is also home to more than half of the world's refugee population.

UNFPA plays a growing role in responding to both natural and manmade disasters in the region, which are ever-increasing in both numbers and magnitude. In September 2018, for example, supplies purchased in advance and stored nearby met urgent needs during two natural disasters: Typhoon Ompong in the Philippines and a powerful earthquake and tsunami in Indonesia.

Nine months pregnant when Typhoon Ompong hit the **Philippines**, Ginalyn Franco fled uphill for three hours through wet, muddy terrain until she reached the evacuation centre.

"Even though I was very scared for myself and my baby, I had to stay strong. The rains were so powerful that landslides started happening near our house so we had no choice but to leave," Ms. Franco, 24, told UNFPA.



More than 2,000 people died and some almost 80,000 are living in displacement camps, according to the UN Office for the Coordination of Humanitarian Affairs.

In **Indonesia**, a powerful earthquake and the resultant tsunami caused Ibu Fariati's home to collapse under a wall of water.

UNFPA estimates that 45,000 pregnant women were affected.



Displaced at an evacuation site, Ms. Fariati, 27, told UNFPA about her fears: "We live under a small tent, which we share with six other families. My two daughters are still small. They are too young to face this... At night, I am scared to use the communal toilets. There are no lights or doors... Another scary thing is that my contraceptive pills are almost finished. It would be a disaster to get pregnant here," she said.

Objectives

The goal of the **Regional Prepositioning Initiative** is to ensure that the essential needs of women and girls in Asia and Pacific are met by governments, UN agencies and key stakeholders during emergencies. UNFPA achieves this through the timely distribution of lifesaving commodities and supplies by trained partners. This is only possible because the essential supplies that UNFPA uses in humanitarian responses are strategically prepositioned in the region — such as emergency reproductive health kits, dignity kits and tents that can be used as maternity or women-friendly spaces.

Strategy and interventions

Strategically prepositioning supplies in disaster-prone countries and regional hubs — one in Brisbane, Australia and another in Suva, Fiji — has enabled UNFPA to respond faster, better and more efficiently to humanitarian crises across the region. The Regional Prepositioning Initiative focuses on 11 priority countries: Bangladesh, Fiji, Indonesia, Myanmar, Papua New Guinea, Philippines, Samoa, Solomon Islands, Sri Lanka, Tonga and Vanuatu. The prepositioned supplies are used wherever they are needed, in these and other countries.

Small quantities of vital supplies: The prepositioned supplies cover (1) small-scale responses or (2) immediate needs in the aftermath of a large-scale disaster while additional procurement takes place. Small quantities of vital supplies are procured and stored in disaster-prone countries that face cyclical or recurrent emergencies. (The small quantities reduce the risk that supplies may expire before an emergency occurs.) The regional hubs can support humanitarian responses in countries that do not have their own prepositioned supplies, or provide additional support in larger-scale crises when more supplies are needed. The costs associated with prepositioning, such as warehouse rental, insurance, monitoring and inventory management are factored into the budget to ensure that supplies are well managed.

Supply chain management: Beyond supplies, the Regional Prepositioning Initiative also aims to build humanitarian capacity, particularly in logistics, and ensure the effective management and use of sexual and reproductive health commodities in emergencies. In the first two years of the initiative more than 200 people from UNFPA, government and partner organizations completed humanitarian logistics trainings, and more than 50 people completed courses on humanitarian preparedness and gender-based violence in emergencies.



UNFPA supplies at the warehouse in Brisbane, Australia, in July 2017. © UNFPA/DFAT

Progress and results

In 2018 alone, Australia's support through the initiative has made life-saving supplies immediately available in 17 emergency responses across nine countries in Asia and the Pacific. From May 2017 to August 2018, over US\$ 600,000 worth of prepositioned supplies were distributed through the Regional Prepositioning Initiative thanks to DFAT's support. These supplies have reached more than 60,000 people affected by 19 emergencies across nine countries in Asia and the Pacific, including people displaced in the following crises.

Myanmar: responding to annual floods

During the monsoon season Myanmar experiences annual floods; more than 91,000 people were temporarily displaced in 2017 and more than 122,000 people were temporarily displaced in 2018. UNFPA has drawn from nationally prepositioned supplies to support government and other partners to provide essential services to women and girls both years. In 2017, UNFPA delivered emergency reproductive health kits to health care centres in 12 townships and one regional hospital enabling 3,310 women who were displaced to receive pregnancy and antenatal care and referral support for safe deliveries. In 2018, UNFPA provided dignity kits and clinical delivery assistance kits to support the government and other partners in reaching 1,190 of the most marginalized women and girls.

Papua New Guinea: leaving no one behind

The eruption of Mount Kadovar in Papua New Guinea in January 2018 saw all 557 inhabitants of the island resettled in a temporary site that is not easily accessible – it is an hour's drive and then a four-hour walk to the nearest health facility. Using prepositioned supplies, UNFPA was able to provide the seven women who were pregnant at that time with individual clean delivery packs, ensuring that they had their most basic needs met.

Lao PDR: reaching remote communities quickly

UNFPA did not have any supplies prepositioned in Lao PDR when a hydroelectric-power dam collapsed there in July 2018, causing flash floods throughout Attapeu province. However, thanks to UNFPA's close partnership with Australia, 2,700 dignity kits and clean delivery kits for 400 pregnant women and 10 birth attendants were available within 48 hours of the government's request for assistance. The supplies were transported free of charge alongside other relief items on an Australian Defence Force aircraft from the warehouse in Brisbane, Australia, to Pakse, Lao PDR.

Tonga: resupplying hospitals hit by tropical cyclones

When Tropical Cyclone Gita hit Tonga in February 2018, it was the worst disaster the country had faced in 60 years; less than two months later the small Pacific island nation bore the brunt of another major cyclone, Tropical Cyclone Keni, which took the roof off 'Eua hospital. Through the Regional Prepositioning Initiative, UNFPA was able to provide life-saving sexual and reproductive health commodities from regional hubs in Brisbane and Suva to restock the central medical warehouse, and support the Ministry of Health's hospitals and outreach efforts. UNFPA provided a range of emergency reproductive health kits including clinical delivery assistance, rape treatment, STI treatment, and vacuum extraction kits that were used in health facilities across the country, directly benefiting 2,484 people.

Results at the regional level

Improved humanitarian logistics capacities for reproductive health supplies

Training in humanitarian logistics is an important part of the Regional Prepositioning Initiative. Training sessions have been held in Bangladesh, Fiji, Indonesia, Myanmar, Papua New Guinea, Philippines, Tonga and Vanuatu. Over 200 participants from UNFPA, government and other implementing partners have completed the training and are better prepared to receive, store, transport and use emergency reproductive health kits and other vital supplies for sexual and reproductive health and gender-based violence (GBV) survivors.

Closer collaboration with donors and partners

The Regional Prepositioning Initiative has led to a stronger partnership and collaboration between UNFPA and Australia, which in 2018 invested an additional AUD\$ 1.1 million. The partners have co-convened events such as a strategic dialogue on sexual and reproductive health and GBV in emergencies that brought together key stakeholders from 19 organizations in November 2017. Participants considered how humanitarian preparedness and response can be more disability-inclusive, how regional and global agreements and guidelines can be used in advocacy, and how to strengthen humanitarian policies and programming in countries of the region.



The rapid deployment of critical supplies, including clean delivery kits and dignity kits, for women and girls is a cornerstone of UNFPA's humanitarian response in Asia and the Pacific and globally, including in the aftermath of Cyclone Gita in Tonga. © Australia DFAT/James Deane

UNFPA humanitarian response in the Philippines

Saving lives through reproductive health medical missions

Armed conflict between the Armed Forces of the Philippines and the Maute Group (which is considered to have links with ISIS) broke out on 23 May 2017 in Marawi City, Lanao del Sur Province, leading to the displacement of more than 400,000 people, loss of lives and mass destruction of civilian infrastructure including health facilities.

Using supplies prepositioned nationally through the Regional Prepositioning Initiative, UNFPA conducted 23 reproductive health medical missions providing essential prenatal and antenatal care to 3,497 pregnant and lactating women. UNFPA also established women friendly spaces in the displacement camps and distributed 11,460 dignity kits to women of reproductive age. In total UNFPA's response directly reached 30,594 people displaced by the conflict, using over \$270,000 worth of supplies alongside other resources.

Vulnerable to natural disasters

The Philippines is one of the most disaster-prone countries in the world. Every year an average of 22 tropical cyclones hit the country, of which approximately six or seven cause significant damage. As part of preparedness efforts, UNFPA has developed customized “sets” of supplies for many of their standard interventions (such as women-friendly spaces, maternity tents and reproductive health medical missions). Each set contains everything needed to effectively set up and run an intervention, including tents, furniture, medical equipment, stationery and essential reproductive health supplies.

Response to Typhoon Ompong, September 2018

Typhoon Ompong was one of the strongest typhoons ever to hit the Philippines, affecting more than 1.7 million people. Working with the country's Department of Health, and with support from Australia, UNFPA distributed 1,200 dignity kits to pregnant and breastfeeding women. Clean delivery kits and clinical delivery equipment were also distributed to health workers in affected areas.

Mayon volcano eruption displaces women and new mothers

High levels of volatility called for a three-month evacuation. In February 2018, a maternity tent set was transported to the municipality of Santo Domingo and, in partnership with the Department of Health and local government, four medical teams operated the facility 24/7 for a one-month period, providing 1,305 services to women of reproductive age.

Earthquakes

A magnitude-6.5 earthquake struck off the coast of Surigao del Norte on 10 February 2017. Suruago City was the most affected area. Five months later, on 6 July, a 6.5-magnitude earthquake struck the island of Leyte, displacing more than 9,000 people. UNFPA responded by providing dignity kits for the affected pregnant and breastfeeding women in the region.



UNFPA dignity kits stand ready for distribution to displaced women like this new mother. © UNFPA Philippines

Lessons and conclusions

Prepositioning has dramatically improved UNFPA's humanitarian response in Asia and the Pacific in terms of speed, quality and efficiency and should continue. Prepositioning has strengthened UNFPA's reputation and reliability as a humanitarian actor, provided new opportunities to advocate for SRH and GBV initiatives in humanitarian response, and helped to build trust with governments and other partners.

1. Prepositioning allows UNFPA to respond faster. Nationally prepositioned supplies can be immediately handed over to implementing partners in affected areas, whereas those procured in the aftermath of an emergency are rarely on the ground within a week. Even in countries where UNFPA is not nationally prepositioning supplies, the close partnership between UNFPA and DFAT has ensured delivery of supplies within 48 hours; for example, reproductive health supplies were transported alongside other relief supplies after Tropical Cyclone Gita struck Tonga and when flash floods occurred in Lao PDR.
2. Prepositioning is part of emergency preparedness efforts. It can help improve the quality of a response. Prepositioning supplies ensures that what is immediately available at the onset of a crisis is customized for the country context – for example, that dignity kits include culturally appropriate clothing in suitable sizes. Because many of the priority countries in this initiative face emergencies on a regular basis, they have learned from affected communities what supplies will best support a response.
3. Prepositioning is an entry point for UNFPA. Governments across Asia and the Pacific have invested significantly in humanitarian preparedness, yet they do not always have the capacity to respond to sexual and reproductive health needs. National prepositioning of supplies provides an entry point for UNFPA to provide support for sexual and reproductive health even when governments do not formally request international assistance in this area. Also, having supplies available in-country means that UNFPA can support small scale responses where it would not otherwise have been feasible to mount a response. In areas where access to affected communities is compromised because of conflict, it is vital to have supplies prepositioned that can be immediately used whenever humanitarian access is temporarily granted.
4. Prepositioning reduces transportation costs. Transporting supplies by sea freight for prepositioning is significantly cheaper than air freighting supplies in the acute phase of a response, and also reduces carbon emissions. In the last year, UNFPA has saved over US\$ 150,000 on freight costs. For example:
 - For the Lao PDR flood response, the transportation cost associated with prepositioning the dignity kits was \$1.50 per kit. In contrast, the quotation received for air freighting dignity kits during the acute phase of the response was more than \$12 per kit.



Transporting reproductive health supplies in remote Papua New Guinea. © UNFPA PNG

- When an earthquake struck the remote Southern Highlands province in Papua New Guinea 2,500 prepositioned dignity kits were drawn from supplies in Fiji. The cost of prepositioning these kits was just \$2 per kit; the quotation received for air freighting dignity kits during the acute phase of the response was \$22 per kit.

5. Prepositioning builds capacity and strengthens partnerships. Prepositioning has changed how governments view UNFPA as a humanitarian partner in the 11 countries of this initiative. Having supplies immediately available has given UNFPA a seat at the table when developing humanitarian response plans, and enabled UNFPA to advocate for SRH and GBV far beyond the provision of supplies. Prepositioning also supports resource mobilization and builds the profile of UNFPA and donors; for example, adding logos to supplies ensures greater visibility. The process is also helping to build trust with governments, humanitarian actors and partners for humanitarian response as well as regional efforts to achieve the Sustainable Development Goals.

For updated information, see the UNFPA Transparency Portal www.unfpa.org/data/transparency-portal and UNFPA Humanitarian Emergencies www.unfpa.org/emergencies.

Partners

National governments, including Ministries of Health, national disaster management organizations, Ministries of Women and Social Welfare, in all 11 priority countries

Australia's Department of Foreign Affairs and Trade (DFAT)

Implementing partners in-country including International Planned Parenthood (IPPF) member associations

Inter-Agency Standing Committee (IASC) members

In the Philippines in particular, the Coalition Against Trafficking in Women, Asia Pacific (CATWAP), EnGendeRights, Family Planning Consortium of the Philippines, Philippine National Police, Plan International and Save the Children.

UNFPA would like to thank key supporters of humanitarian response and UNFPA Supplies: Australia, Belgium, Bill & Melinda Gates Foundation, Canada, Children's Investment Fund Foundation, Denmark, European Union, Finland, France, Friends of UNFPA, Iceland, Ireland, Italy, Japan, Kuwait, Liechtenstein, Luxembourg, the Netherlands, New Zealand, Norway, Portugal, The RMNCH Trust Fund, Republic of Korea, Slovenia, Spain, Spain-Cataluña, Sweden, Treehouse Investments, United Kingdom, United Nations Central Emergency Response Fund, UNDP, UNOCHA, UNOPS, Winslow Foundation and private individuals (online).

Acknowledgments: Produced by UNFPA's Humanitarian and Fragile Contexts Branch, Commodity Security Branch and UNFPA Supplies, with support from Priya Marwah, Branwen Millar in the Regional Office and Angelito Umali and Lori Kato in the Philippines.



Ensuring rights and choices for all

United Nations Population Fund
605 Third Avenue
New York, NY 10158
Tel. +1 212 297 5000
www.unfpa.org

Cover photo: Pregnant women displaced by the Mayon volcano eruption received dignity kits and antenatal check-ups in a tent established as a maternity clinic in Albay Province, Philippines.
© UNFPA Philippines, 2018