



# UNFPA Preparedness and Response To the Rescued Girls

## SITUATION



The Boko Haram conflict led to **THE ABDUCTION OF OVER 7,000 WOMEN AND GIRLS, + 276 CHIBOK GIRLS.**



UNFPA welcomes the ongoing negotiations that led to the release of 21 Chibok girls and is expected to lead to the release of more girls who were kidnapped from the north-eastern Nigeria, including the remaining Chibok Girls.

*These girls have languished in captivity long enough, and it is high time they are returned to their families, communities and schools.*

For us, every abducted person during this crisis is a Chibok girl.



So UNFPA's response is not only specific to the 21 girls recently rescued but to every female survivor of the Boko Haram insurgency.

A total of 58 Chibok girls have previously escaped or rescued



In April 2015, 275 women and children were rescued followed by subsequent smaller caseloads. Last month 566 women and children were rescued in Borno State with additional 121 rescued in Yobe State

We owe it to these girls to positively support their homecoming and reintegration.



We at UNFPA are prepositioned, ready and committed to help achieve that.

## RESPONSE AND PREPAREDNESS



UNFPA's support is in line with the needs of the women and girls and working closely with the Federal and State governments.



UNFPA anticipates the release of more girls in the coming weeks and we are on standby to respond to their immediate sexual and reproductive health needs.



UNFPA is quick to respond to the needs of women in emergencies, an example is in April 2015 when the first set of rescued girls from Sambisa Forest were released and the Fund was in the forefront in the response to their needs.

## RESPONSE AND PREPAREDNESS

As part of the effort to treat, stabilize, recover and reintegrate the girls, we at UNFPA will continue to provide psychosocial and medical support to the girls and their relatives. UNFPA, as part of the United Nations Country Team, will also address their reproductive health needs and help the Federal and State Ministries of Health in providing them with the required health services. Specifically in preparation for the release of the abducted girls and women, UNFPA has repositioned:

### 442 PSYCHOSOCIAL COUNSELLORS

to provide urgent psychosocial support to the girls and women



### REPRODUCTIVE HEALTH KIT

for safe delivery services, treatment/prevention of diseases, and for family planning.



### SAFE SPACES FOR WOMEN AND GIRLS

for RH/GBV information dissemination, education psychosocial services, counselling and facilitate referrals



### DIGNITY KITS

to improve the hygiene of the most affected women and girls and protect their dignity



### CAPACITY BUILDING

of government, NGOs and affected communities for effective humanitarian action

These services have been provided by the Fund since it launched its humanitarian response in early 2014. UNFPA's response is focused on restoring access to the minimum initial service package for reproductive health in humanitarian settings (MISP), including response to gender based violence and psychosocial support. Since early 2014, UNFPA reached inter alia:

about

**8 MILLION**

people with essential information on SRH and GBV prevention and response

**87,910**

pregnant women received clean and safe delivery services

**174,118**

traumatized persons reached with psychosocial support and other essential services

**11**

safe spaces for women and girls have been established in priorities IDP camps and host communities

**54,000**

women and young girls received dignity kits for their personal hygiene

## WHAT WE CAN DO BETTER

While sexual and reproductive health services are increasingly provided in humanitarian responses, striking gaps remain.

The world has repeatedly affirmed the sexual and reproductive rights of women and girls. Now it needs to deliver in all situations, including humanitarian crises.

The released girls are currently under the custody of the government who committed to provide all the care the girls require. UNFPA will continue working with the other humanitarian partners to advocate for unimpeded humanitarian access to the rescued girls and others reported to be held in detention centres for deradicalization.

Conflicts and natural disasters do not exempt any government or humanitarian actor from obligations. Embodied in the Programme of Action of the 1994 International Conference on Population and Development (ICPD) is the need to uphold the right of the individual to sexual and reproductive health, including the right to decide freely and responsibly whether, when or how often to become pregnant.

## CALL TO ACTION

- We need to mobilize more resources and pool the resources for more value for money
- However, the current Humanitarian events in the North East are more than a national call for resource mobilization. We must think and act out of the box. We all need to come together to deliver one humanitarian intervention.
- Working in close collaboration with partners in the Inter-Agency Standing Committee (IASC), UNFPA has a crucial role in providing expertise on sexual and reproductive health, gender-based violence, and population data during crisis.
- The strategy is also fully aligned with IASC's recently adopted transformative agenda to improve delivery of humanitarian aid.
- Targeted support to women is one of the best ways to ensure the health, security and well-being of families and entire communities.
- That is why UNFPA is leading efforts to ensure that the specific needs of women and girls are factored into humanitarian response.