Australia’s Humanitarian Aid

Women’s and Children’s Health in Emergencies

In times of crisis women and children suffer most. Women accounted for 61 per cent of deaths in Cyclone Nargis in Myanmar and up to 80 per cent of those who died during the 2004 Indian Ocean tsunami. In the 1991 Bangladesh cyclone, death rates among women were almost four times higher than those among men.

More than 500,000 women die globally each year as a result of complications during pregnancy and childbirth. High maternal and child mortality persists and many of these deaths occur during humanitarian emergencies. Most are preventable. When Australia responds to a humanitarian crisis—natural or man-made—the health of women and children is a priority. This is in line with our commitment to the UN Millennium Development Goals.

**Globally, the number and scale of disasters is increasing. The Asia-Pacific is the most natural disaster-prone region.**

Australia focuses humanitarian assistance on reproductive and sexual health—better health care, safer environments, tackling diseases, responding to violence and gender equality. During a crisis, reproductive and sexual health services often become unavailable. This includes prenatal care, assisted childbirth and family planning services. At the same time, women are at greater risk of violence and, through it, sexually-transmitted diseases and unintended pregnancies.

To strengthen humanitarian work in this area, Australia helped fund a global manual for reproductive health in emergencies—an international standard of care that all aid organisations can follow. We also support SPRINT—a program that has trained thousands of health care professionals in 81 countries across Africa, Asia and the Pacific, to increase access to sexual and reproductive health services in crisis situations. The program will result in greater access to treatment, care and support for those exposed to sexual and gender violence; a reduction in HIV transmission; fewer unintended pregnancies; and fewer preventable maternal and neonatal deaths.

**Australians donate more than $100 million each year to help those affected by disasters and conflict overseas.**

People who are displaced are extremely vulnerable. About 80 per cent of refugees and internally displaced people in crisis situations are women and children. One in five women of reproductive age in a refugee or displaced population will be pregnant at any one time.

Australia works with the United Nations High Commissioner for Refugees to reduce maternal and child mortality in refugee camps through humanitarian aid. Australia’s support for 10 new International Committee of the Red Cross health care centres across the south of Afghanistan has given many women and children in conflict-affected areas access to health services, including safe motherhood programs covering antenatal, postnatal and children’s health.

**We help countries develop the skills needed to manage disasters themselves. These skills also help countries to coordinate aid from other nations.**

In a natural disaster, Australia’s emergency medical assistance includes maternal and child health. During the Pakistan floods, Australia distributed safe birthing kits to support health services for displaced pregnant women and community midwives. It also established a temporary health clinic in an area affected in the Punjab, providing health care for more than 11,000 patients. Fourteen-year-old Uzma carried her pale and lethargic 17-day-old son Mohamad into one of the treatment tents, just a few hours after it opened. Mohamad was severely dehydrated. He had been suffering from acute diarrhoea for almost half of his short life, due to the floods. After several hours of treatment, the near lifeless boy was saved.

During and after disasters like this one, our humanitarian aid also helps to protect women and children from exploitation and violence, provides nutritious food and shelter, sets up temporary classrooms and reduces the spread of disease through improved hygiene, safe water and immunisation.

**Australia is increasing its humanitarian work to help those in dire need.**

Australia partners with the governments of those countries affected by a crisis, United Nations agencies, non-government organisations and local communities. We strive to improve the way we deliver aid together, to be responsive to the needs of women and children under extreme stress. Australia’s partnership with the United Nations World Food Programme (WFP) is a long one. Access to food and ensuring adequate nutrition are principal concerns—especially for pregnant women, mothers and children. Food aid is an essential part of any humanitarian response.

Australia will provide the WFP with $180 million over four years (2010 to 2014) towards global food aid operations. This includes $40 million for school feeding programs. More predictable and flexible funding gives the WFP greater control over food supplies, allowing it to purchase commodities at lower prices and build stores for rapid and efficient distribution. The agreement is the first of its kind with any donor nation and is in line with Australia’s commitment to the Principles and Good Practices of Humanitarian Donorship.

**We work in partnership around the world. Humanitarian action is strongest when everyone works together.**

Perhaps the most powerful assistance is ensuring women and children have a say in how communities rebuild after a disaster or conflict and how they can become more resilient to future crises. As carers they look after children and injured or sick relatives, have fewer opportunities for employment and education and, in families under stress, face increased violence.

A post-tsunami assessment in Thailand, reported that young women who lost their jobs were in danger of being forced into commercial sex work, with fears of increases in HIV and other diseases. While in parts of India and Pakistan, during drought men migrate to cities or move out with animals in search of water and pasture—leaving women, children and the elderly to produce food, get water and look after the household.

Australia strives to ensure that women and children are included in disaster risk reduction planning so their needs are catered for, they are not placed at further risk, and they are part of decision-making processes.

**Preparing for disasters and reducing their potential impact, protects lives and development progress.**

Australia’s humanitarian aid helps children in many ways. Our longer-term recovery and rebuilding support includes mine action. Children are a critical audience—to educate and protect them from becoming victims of landmines and to rehabilitate those who have been injured.

Our assistance during a crisis concentrates on more immediate needs. Health centres look after their physical health. Reproductive and sexual health clinics both treat and prevent child exploitation. Children are helped to come to terms with grief and the events of a disaster or conflict. After the Haiti earthquake, as well as providing food, water and shelter for children, we supported safe zones. Nearly 60,000 children accessed these child-friendly areas and activities which helped their recovery while keeping them safe. The areas also provided much-needed childcare and peace of mind for parents addressing the many tasks associated with rebuilding their homes, incomes and lives.

**Disaster response is important. More information about Australia’s humanitarian aid is available online at www.ausaid.gov.au**