Purpose / Role
This position will lead integration of sexual reproductive health (SRH) as part of CARE’s emergency preparedness and/or response activities. Ensure that the Minimal Initial Service Package (MISP) for RH, an interagency and WHO approved standard is integrated into the SRH/health activities. The MISP includes prevention of maternal and newborn mortality and morbidity through provision of clean delivery kits, referrals to existing quality emergency obstetric care (EmOC) services and family planning services, HIV/AIDS prevention activities, prevention and management of sexual violence, and planning for comprehensive SRH services. S/he will lead or support assessments, strategy development, project design, project management and implementation, development of monitoring and evaluation systems by contributing to proposal development, training, and liaising with donors and interagency coordination groups such as the health cluster, RH working group, and GBV working group. Collaborate and coordinate closely with all other members of the emergency response team and link development with emergency response activities. Ensure Global Health Cluster guidelines and tools and CARE Emergency Toolkit (CET), SPHERE Manual, and the IAWG Interagency Field Manual for RH in Humanitarian Situations serve as basis for SRH programming.

Responsibilities and Tasks
1. Assessment
   - Collect secondary data on key SRH indicators such as maternal mortality ratios, contraceptive prevalence rates, GBV data, and HIV/AIDS statistics. Review existing assessment reports by the MOH, UN agencies, International NGOs, etc.
   - In collaboration with the emergency response team, plan and conduct rapid assessments followed by more in-depth assessments. Coordinate and collaborate with the health cluster, SRH working group, and local health authorities and community members on all assessments. Share assessment findings with the health cluster, RH working group, and community members.

2. Strategy Development
   - Working with development and emergency response team members, develop strategy for integrating SRH into emergency response including linkages with specific sectors. For example, distribution of clean delivery kits, condoms and newborn kits through NFI distribution.

3. Proposal Development
   - Participate in establishing funding requirements for reproductive health activities and contribute to the development of proposals for emergency response and transition. Work with finance department to develop appropriate budgets.

4. Management and Implementation
   - In collaboration with country office technical staff, manage and provide overall leadership of SRH component of CARE’s emergency response. Ensure it is appropriately integrated with CARE’s overall preparedness, response and transition activities.
   - Identify key partners for both the response and transition to development.
   - Coordinate implementation of the MISP:
     - Ensure sufficient human and financial resources to implement the MISP and transition to comprehensive SRH programming that includes referrals and/or clinical services for FP including IUDs and post abortion care (PAC).
     - Coordinate with UNFPA to obtain necessary RH kits (CARE has a global MOU with UNFPA that should facilitate this process). The kits are frequently free during new onset emergencies. It is best to purchase RH supplies through usual procurement procedures or purchase UNFPA RH kits if necessary.
     - Train staff as needed to implement SRH activities including the MISP.
     - Ensure GBV prevention and response services, clean and safe delivery services including referral to quality EmOC services and family planning services, prevention of HIV, and treatment of STI services are available. Refer to the Interagency Field Manual for RH in Humanitarian Situations and the IASC Guidelines for GBV in Emergencies for implementation activities.
     - Ensure gender is integrated into SRH/health activities. Refer to the IASC guidelines for Gender in Emergencies.
   - Ensure linkages between existing country office SRH and health projects and the emergency response and ensure strategies build upon in-country expertise and promote sustainability
     - Work with CARE and partner staff to develop comprehensive programs for RH that include: 1) provision of health services that provide family planning, maternal and newborn care, emergency

CARE INTERNATIONAL ROSTER FOR EMERGENCY DEPLOYMENT (CI RED)
TERMS OF REFERENCE – SEXUAL REPRODUCTIVE HEALTH
obstetric and neonatal services, HIV/AIDS and STI management; 2) appropriate prevention and response for survivors of GBV; 3) links with the program approach; and 4) activities to challenge gender and social norms that affect the reproductive health of the target population

5. Liaison and Coordination
- Represent CARE’s work and specifically SRH activities in health cluster, RH working group, GBV working group meetings; as well as other coordination meetings with the MOH.
- Network with key donors such as OFDA, PRM, DFID and ECHO at cluster and working group meetings. Submit proposals to the flash appeal.
- Coordinate with other sector responses within CARE (WASH, Shelter, Food, Gender, DRR, etc…) to ensure a multi-sector approach to SRH.
- Coordinate with all appropriate CARE groups such as communications, CI SRH advisors, gender specialists, and advocacy.

6. Human Resources and Administration
- Depending upon the country context, coordinate and/or implement staff training for HIV prevention (in the absence of the HIV/AIDS Advisor), including universal precautions for all health staff, safe blood supply, and HIV/AIDS IEC messages appropriate for population.
- As needed, work with HR to ensure all staff are trained on prevention of sexual exploitation and abuse (PSEA) and are fully informed of the code of conduct and zero tolerance for SEA.
- In collaboration with health and M&E managers, design and develop supervisory, monitoring and evaluation systems for SRH interventions.

Key Internal Contacts
CI RED Team Leader and/or ACD Program or CO Emergency Manager when appropriate; Logistics and Program Support Manager; Health Sector Coordinator; Security Advisors/Officer; and CI SRH and Health Specialists

Key External Contacts
Ministry of Health, UN (particularly UNFPA, UNICEF, UNHCR), Health Cluster, SRH Working Group, GBV Working Group, National and international NGOs, RHRC Consortium, local CBOs or associations, and security personnel (UN, local police).

Reporting lines
Reports to CI RED Team Leader

Selection Criteria
Core Competencies
- People Skills: Ability to work independently and as a team player who demonstrates leadership and is able to support and train local and international staff and also able to work with disaster affected communities in a sensitive and participatory manner.
- Communication Skills: Well developed written and oral communication skills. Able to communicate clearly and sensitively with internal and external stakeholders as a representative of CARE. This includes effective negotiation and representation skills.
- Integrity: Works with trustworthiness and integrity and has a clear commitment to CARE’s core values and humanitarian principles.
- Resilience/Adaptability and flexibility: Ability to operate effectively under extreme circumstances including stress, high security risks and harsh living conditions. Works and lives with a flexible, adaptable and resilient manner.
- Awareness and sensitivity of self and others: Demonstrates awareness and sensitivity to gender and diversity. Have experience and the ability to live and work in diverse cultural contexts in a culturally appropriate manner. Has a capacity to make accurate self-assessment particularly in high stress and high security contexts.
- Work style: Is well planned and organized even within a fluid working environment and has a capacity for initiative and decision making with competent analytical and problem solving skills.
- Knowledge and skills: knowledge of CARE policies and procedures, Sphere and the Red Cross/ NGO Code of Conduct. Requires general finance, administration, information management and telecommunication skills and proficiency in information technology/ computer skills.
- 3 – 5 years humanitarian aid experience.
- Multiple language skills desirable.
Technical Competencies required for this position are

- SRH technical expertise
- MPH, nursing or medical degree, or related degree with emphasis on reproductive health
- Previous experience in medium-large scale emergencies (1 year minimum or frequent short term deployments)
- Capacity to develop, implement and analyze health assessments, develop and implement work-plans in emergency settings
- Experience in budget management
- Skills in training, monitoring and evaluation of health interventions
- Strong writing skills and report writing
- Strong knowledge of MISP and implementation requirements and must have completed one of the following:
  - MISP Distance Learning Module, www.rhrc.org
  - Participated in a MISP training led by SPRINT or some other well recognized group