

Our lives do not stop in an emergency.

Periods do not stop in an emergency.

Sex does not stop in an emergency.

Pregnancy does not stop in an emergency.

Having sexual and reproductive health & rights makes sure emergencies don't stop us living our lives.



In [the Rohingya crisis], XX% of refugees were women or children.

First responders identified...

Health ministries in Bangladesh had planned....

International donors prioritised...

Once identified, their needs were responded to by specialists...

sanitary products...

pregnancies...

trauma dealt with, prevented...



Compared to areas without SRHR services, xx% fewer incidents...

...mothers able to give birth safely when they were ready for it...

...girls going to school instead of dropping out...

...STIs prevented...

You can make success stories more common

Providing sexual health services prevents emergencies becoming crises:

Neglecting the MISRP in humanitarian settings has serious consequences: preventable maternal and newborn deaths; sexual violence and subsequent trauma; sexually transmitted infections; unwanted pregnancies and unsafe abortions; and the possible spread of HIV.

This is what women in an emergency want:

Many women and couples want to space or limit pregnancies following displacement. Across diverse contexts, 30% to 40% of women experiencing displacement did not want to become pregnant in the next two years, and 12% to 35% wanted to limit the number of pregnancies.

Sexual health services save lives:

Maternal death is a leading cause of mortality for women of reproductive age globally. Fulfilling unmet need for contraception could avert nearly one in three maternal deaths.

What you can do

1. You do not need to wait for assessment

[Insert any necessary detail or links for ask]

2. [Insert simple, actionable ask]

[Insert any necessary detail or links for ask]

3. [Insert simple, actionable ask]

[Insert any necessary detail or links for ask]