

JOB DESCRIPTION

Preliminary Job Information

Job Title	REPRODUCTIVE HEALTH OFFICER
Country & Base of posting	KABUL, AFGHANISTAN
Reports to	MEDICAL COORDINATOR
Duration of Mission	3 months

General Information on the Mission

Context

Première Urgence Internationale (PUI) is a non-governmental, non-profit, non-political and non-religious international aid organization. Our teams are committed to supporting civilians' victims of marginalization and exclusion, or hit by natural disasters, wars and economic collapses, by answering their fundamental needs. Our aim is to provide emergency relief to uprooted people in order to help them recover their dignity and regain self-sufficiency. The association leads in average 190 projects by year in the following sectors of intervention: food security, health, nutrition, construction and rehabilitation of infrastructures, water, sanitation, hygiene and economic recovery. PUI is providing assistance to around 5 million people in 20 countries – in Africa, Asia, Middle East, Eastern Europe and France.

Afghan mission is the oldest PUI mission, with first medical intervention launched in 1980 just after the Soviet Invasion. Since then, the country has mostly been in conflict, with both national armed groups and international forces, causing mass casualties and massive movements of population, within or out of the countries: out of the 30 millions in country population, 805.000 are registered as IDPs. 272.000 since January 2015, 3.703.000 Afghan refugees are registered in foreign countries (UNHCR, 2014).

Since NATO intervention in 2001, humanitarian assistance and development projects have reached unprecedented levels of funds and intervention in the country. In the 2012 Tokyo Conference, Afghanistan announced its road map toward self-reliance. However, great challenges remain to overcome. Security, social and economic development, good governance, and justice are, among other issues, essential pre-conditions in order to achieve the country's ambitious objectives.

However, due to the raise of Armed Opposition Groups and the constantly increasing number of fights in the country, the security situation remains unstable. Many attacks continue to claim lives among the Afghan population. In April 2014, the Presidential poll marked the transfer of power from one elected president to another for the first time in the country's history. The political transition coincides with a security transition as Afghan security forces have taken up security responsibility from international forces which withdrew at the end of 2014. Humanitarian stakeholders forecasted an increased level of violence, a rise in unemployment and criminality. Those most affected are IDPs, the war wounded, and the people living in contested areas. As a consequence of constant unrest and lack of economic perspectives, many people flee the country being to neighboring countries such as Iran or Pakistan, or to Europe (in terms of population, Afghan people are the second nationality represented in the migrants continuous flux to Europe according to Frontex Agency).

Thus, Afghanistan is today at crossroads, between increasing autonomy and development of infrastructures, within chronic vulnerabilities and complex emergencies to deal with: AOG are extending their territories, number of armed clashes and of casualties is constantly increasing, and natural disasters (such as the Earthquake which affected the country on 23rd October 2015) are challenging the resilience of communities (8 millions people were assessed in food insecurity situation in 2015 according to Fewsnet)

Rebuilding and strengthening the health-care system is still a priority in Afghanistan, with the country-wide continuation of the implementation of BPHS (Basic Package of Health Services) and the EPHS (Essential Package of Hospital Services), initiated in 2003 and 2005, and the implementation of emergency responses.

PUI's strategy/position in the country

PUI strategy is to address the fundamental needs of the Afghan population in respect with all humanitarian principles. Indeed, Neutrality and impartiality are key principles to respect in order to enable humanitarian access to the affected populations.

PUI has a strong health expertise in the country that can be used as an entry point to implement an integrated approach to support the population to regain their most basic needs and also to their self-sufficiency. Indeed, such problems as malnutrition and

undernutrition request a multi sectoral and comprehensive response in order to decrease the prevalence of the phenomenon. Since the beginning of 2013, PUI in Afghanistan decided to start interventions on emergency preparedness and medical interventions for conflict-affected populations. With constant increasing of civilian casualties during from January 2014 to June 2015 (4.900 registered during the first 2015 semester), it is indeed crucial to have health staff prepared and equipped for mass casualties, and also to implement responses to population displacements. Due to the violent recent history of the country and the constantly increasing number of security incidents in the country, PUI is developing an advocacy plan for development of PFA in the country, in order to support the development of such activity countrywide.

History of the mission and current programs

Prior to the Première Urgence Internationale (PUI) merger, AMI had been present among local populations in Afghanistan since 1980 for health programs. Currently, the organization is running the following programs:

BPHS/EPHS Project:

Since 2003, PUI has been implementing the Basic Package of Health Services (BPHS) and the Essential Package of Health Services in collaboration with the Afghan Ministry of Public Health, in different provinces. Currently, PUI implements the BPHS in Kunar and Daykundi provinces, and the EPHS in Kunar, running in total 74 health centers and 1 Provincial hospital, and employing more than 1000 health and support staff. In Daykundi, PUI collaborates with Move Welfare organization, an afghan NGO, for the implementation of the basic package of health services supporting 39 health centers and 332 health posts, employing more than 500 medical and support staff.

Emergency life-saving intervention in Kunar and Nangahrar provinces:

This program funded by ECHO started in May 2013. Preparing for a possible escalation of the conflict in the province, senior medical staff are trained on emergency medical care and will replicate the trainings to the staff of the BPHS health facilities. Specific operational plans with definition of early warning systems are developed. With the evolution of the context PUI is scaling-up its emergency activities in Nangarhar as well, extending the successful interventions in Kunar and with additional tailored activities in assistance to IDPs. The partnership with ECHO has been recently extended until end of March 2017.

Although Afghanistan has been almost continuously at war for the last 3 decades (exception of the Taliban Regime 1995-2001) with high trauma caseload and indiscriminate targeting between civilians and fighters, Psychosocial First Aid is very little developed.

This can be explained by the overall destruction of the Health system after soviet invasion, and the many challenges linked with the rebuilding enterprise throughout BPHS and EPHS services.

As BPHS and EPHS implementer in Kunar Province, PUI is working with 49 health Facilities to provide Basic Primary and secondary Healthcare services. Linked with continuous fights in the areas and increasing pressure from AOGs on strategic axis and locations, trauma caseload has been increasing as well.

Parallel to the medical response developed at community or health facility level, PUI has been developing, first as a pilot project, provision of Psycho-social First Aid as integrated to the trauma care services. Thus, in Kunar Province 1,310 PFA consultations and 1,661 community awareness have been conducted in 2015, far above expectations.

Although Psychological trauma largely remain a taboo and that resilience of population in Afghanistan seems quite high, it however highlights the need for PFA in order to decrease the risk of mental disorders and to document the causes of trauma as well (according to PFA consultations data, 42% of the PFA consultations are directly linked with war causes, explosions, fights, bombings..).

WHO support for remote areas

The World Health Organization has been supporting PUI in Daykundi provinces since December 2012 with programs in Kunar (temporary health services provision sites to increase the vaccination coverage) and Daykundi province (temporary outreach health services provision sites during winter while roads are mainly inaccessible) in 2015/15 winter season the same intervention was supported by CHF in Daykundi.

Nutrition programmes in Daykundi and Kunar province:

While Chronic Malnutrition is a major health public issue at the national level (55% of the young children suffering from stunting according to latest National Nutritional survey in 2013), Global Acute Malnutrition also is a major challenge for health stakeholders. PUI then receives the support of the World Food Program, UNICEF, and CHF for the implementation of an Integrated Management of Acute Malnutrition programme covering the whole province of Kunar where SAM rate (6-59 months population considered) is constantly above 2% and GAM rate above the alert threshold (evolution from 17,8 % to 11,6% between 2013 and 2015).

Configuration of the mission

BUDGET FORECAST 2016

8 MILLION EUROS

BASES

Kabul city, coordination office, Nili (Daykundi), Assadabad (Kunar), Jalalabad (Nangahar office)

NUMBER OF EXPATRIATES	10
NUMBER OF NATIONAL STAFF	1190
NUMBER OF CURRENT PROJECTS	13
MAIN PARTNERS	EuropeAid, WHO, UNICEF, WFP, ECHO, MOPH/ARTF, UNOCHA
ACTIVITY SECTORS	Health
EXPATRIATE TEAM ON-SITE	Head of Mission — Finance & Administrative Coordinator – Logistics Coordinator —Medical Coordinator- – Logistician / Administrator of Base Nili- - Grants Officer - Field Coordinators (2) – PFA Advisor

Job Description

Overall objective

The Reproductive Health Officer provides technical support to PUI health programs in Afghanistan, in order to strengthen capacity and quality of reproductive health activities in our areas of intervention and for potential new projects.

Tasks and Responsibilities

- ▶ **Strategy:** Contribute to new projects design and development when related to reproductive health and based on identified needs.
- ▶ **Programs:** Ensure that reproductive health activities are in line with the AFG National reproductive health policy and with PUI health policy and intervention framework; provide technical support for the implementation of reproductive health activities, in collaboration with the medical department and the Field Coordinator; and monitor and report on the reproductive health activities
- ▶ **Logistics and Administration:** Ensure compliance of activities under his/her responsibility with logistical and administrative procedures.
- ▶ **Representation:** Represent the organisation to partners, authorities and local actors involved in reproductive health, when required
- ▶ **Safety & Security:** Participate in ensuring compliance with safety rules in the mission, and raise all safety-related concerns to his/her immediate supervisor.

Specific objectives and linked activities

1. PROGRAMS

- ▶ In collaboration with the reproductive health manager, review the quality of the reproductive health components implemented in the BPHS/EPHS and provide recommendations for improvement
- ▶ Provide technical assistance on the implementation of the reproductive health activities
- ▶ In collaboration with the reproductive health manager and with the M&E team, ensure the quality of the reproductive health data collection, compilation and analysis within the HMIS system. Support the reproductive health team to document and present data, and share lessons-learned and best practices.
- ▶ Contribute to the program progress review and provide support and technical advice to improve results and reach targets set with the standard indicators
- ▶ Provide support for the capitalization of best practices and of all essential reproductive health documents, tools and training materials used in the mission. Assist in their dissemination and adaptation within the mission.
- ▶ Provide technical support for the development of new projects which include reproductive health component.
- ▶ In collaboration with the reproductive health manager to conduct field visit in order to assess the current situation and to provide recommendation and action plan for quality improvement

2. HUMAN RESOURCES

- ▶ Provide technical support to help prioritize activities and develop work plan for the key reproductive health staff in the mission
- ▶ Provide recommendation for professional development of key reproductive health staff in the mission; identify and prioritize learning needs, and ensure that those needs are met with the direct provision of key training modules, and /or with recommendation for relevant external training options.

3. LOGISTIC & ADMINISTRATION

- ▶ Support the medical team in the review of the list and needs for medical equipment, medications and medical consumables related to reproductive health

4. REPRESENTATION

- ▶ Represent PUI with local authorities and reproductive health partners as needed and when requested;
- ▶ Maintain good relations with all stakeholders, consistent with PUI humanitarian principles (neutrality, independence...);
- ▶ Attend relevant coordination meetings according to needs discussed with his/her supervisor;

5. STRATEGY

- ▶ Follow-up, analyse and report on reproductive health epidemiological data, in collaboration with the Medical Coordinator and medical department;
- ▶ Participate in assessing and identifying reproductive health needs and gaps and advise on strategies to address them. Collaborate with the medical and program team to refine the reproductive health strategy
- ▶ Contribute to the development of proposal for health programs, specifically for reproductive health project.

<ul style="list-style-type: none"> ▶ Assess the possibility to develop innovative approaches to address gaps and strengthen reproductive health program ▶ Regular meeting with department of reproductive health of MOH in order to get a large overview of policy and development strategy
Team Management Number of Staff to manage: <ul style="list-style-type: none"> ▶ Direct management: None ▶ Indirect/technical management: 1 reproductive health technical manager
Other Interfaces <ul style="list-style-type: none"> ▶ Internal: Deputy Head of Mission, Medical Coordinator and medical department team members, Head of Mission, Logistics Coordinator, General Administrator, Field Coordinator ▶ External : Local Health Authorities, INGO, technical committee

Required Profile

Required knowledge and skills

	REQUIRED	DESIRABLE
TRAINING	Certificate of midwifery	
PROFESSIONAL EXPERIENCE <ul style="list-style-type: none"> ▶ Humanitarian ▶ International ▶ Technical 	X X X	
KNOWLEDGE & SKILLS	<ul style="list-style-type: none"> ▶ Excellent training skills ▶ Excellent planning skills 	
LANGUAGES <ul style="list-style-type: none"> ▶ French ▶ English ▶ Other (please specify) 	Mandatory	
SOFTWARE <ul style="list-style-type: none"> ▶ Pack Office (Word, Excel) 	X	

Required Personal Characteristics (fitting into the team, suitability for the job and assignment)

<ul style="list-style-type: none"> ▶ Humanitarian experience. ▶ Work experience in a confined and/or insecure location ▶ Ability to work independently and with a sense of initiative and responsibility ▶ High stress tolerance ▶ Diplomatic and open-minded ▶ Good analytic ability ▶ Ability to negotiate ▶ Ability to organize and manage priorities ▶ Ability to respect security rules ▶ Ability to make proposals and find solutions

Proposed terms

Status <ul style="list-style-type: none"> ▶ EMPLOYED with a Fixed-Term Contract
Compensation <ul style="list-style-type: none"> ▶ MONTHLY GROSS INCOME: from 1 815 up to 2 145 Euros depending on the experience in International Solidarity + 50 Euros per semester seniority with PUI
Benefits <ul style="list-style-type: none"> ▶ COST COVERED: Round-trip transportation to and from home / mission, visas, vaccines... ▶ INSURANCE including medical coverage and complementary healthcare, 24/24 assistance and repatriation ▶ HOUSING in collective accommodation ▶ DAILY LIVING EXPENSES (« Per diem ») ▶ BREAK POLICY : 5 working days at 3 and 9 months + break allowance ▶ PAID LEAVES POLICY : 5 weeks of paid leaves per year + return ticket every 6 months