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| **Enabling security and equitable service delivery for pregnant women during a volcanic eruption**  |
| **Background/Objectives**In a disaster pregnant women’s health vulnerabilities are heightened, with shelter being of prime importance. The provision of safe and dignified temporary shelters for pregnant women improves the delivery of maternal and reproductive health (MHR) services, and results in lowering maternal and neonatal mortalities and morbidities. This presentation will review an Indonesian based case study an aspect of which examined how temporary shelters mitigated the equitable service delivery during one particular disaster.**Methods**A retrospective single case study design drew on the 2013 eruption of Mount Sinabung, representative of a common disaster in Indonesia. Data was collected using focus groups discussions, and individual interviews involving 40 participants including women who were pregnant during the eruption, community leaders, and health personnel. The women participants were ages between 15 to 49 years old and were all farmers. The community leaders’ participants included head of villages, religious leaders, and members of women’s groups. The health personnel participants composed of midwives, nurses, pharmacists, nutritionists, and hygiene promoters working in health facilities across affected areas.**Results**The primary convergent theme during the 2013 eruption was *‘lebih baik’* [better] than the previous emergency responses. However, challenges were identified, such as: ‘*No specific room. It was just an open space’* that resulted in lack of privacy; ‘*I sacred to get rape. It was not secure’* due to lack of lighting during night time and the setup of toilets and bathroom that were far from the temporary shelter; ‘*Trash everywhere’* poor hygiene and sanitation in the temporary shelter; and The provision of MRH services were ‘not up to standard’;**Discussion** A well-designed temporary shelter in a disaster signifies a basic human right for security and shelter with the potential to delivery more equitable MRH services for the pregnant women. Attention to the design and provision of temporary shelters that are culturally appropriate and met the need of safety and security needs pregnant women, while promoting dignity after the disruptions caused a natural disaster is critical. Recommendations are made for a minimum set of standards for temporary shelters that accommodate the heightened health vulnerabilities of pregnant women in emergency settings.**Keywords*****Indonesia, emergency, pregnant women, case study, temporary shelter, vulnerability*** |