

Health Working Group (HWG) Syrian, African and Iraqi Refugee Response in Egypt Meeting minutes

Date: 16th June 2014

Time: 10:30 am-2:00 pm

Venue: WHO Cairo- Downtown Office, Conference Room

Co-Chair(s): Dr. John Jaboor (**WHO**) & Dr. Ashraf Azer (**UNHCR**),

Participants:

(Suzan Zanaty)- **MOH**; (Gasser Al Kareem), (Madiha Ahmed) - **WHO**; (Essam Allam), (Eman El Tahlawi) (Ahmed Tawfeek) - **UNICEF**; (Mona Attia), (Jamil Kareem), (Ashraf Azer) - **UNHCR**; (Sarah Arabi) - **UNFPA**; (Magdy Fransis) – **Caritas Cairo**; (Mariam Boctor) - **Caritas Alex.**; (Mohamed) – **MSF**; (Ahmed Mahrous) – **PSTIC**; (Asmaa Yehia) - **IOM**; (Nehal El Burai) - **ICRC**; (Khalid Abu Bakar) - **AMU**; (Ali El Nawawi), (May Kassem) – **Scarabaeus**;

Agenda:

1. Opening.
 2. 3RP Health indicators and reporting by UNHCR.
 3. Operational update from Partners.
 4. AOB.
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Summary of the Minutes:

1- Opening Remarks by WHO Deputy Country Representative, Dr. John Jaboor:

- Dr. Jaboor wanted to emphasize joint effort between agencies, the necessity to mobilize resources, the need to rethink our expectations for the future and possibility of taking on other groups of displaced person. Finally, Dr. Jaboor stressed how essential planning, community outreach, and prevention are to help us succeed in meeting our joint goals for those we help

2- 3RP Health Indicators and Reporting:

- A presentation was given by UNHCR on the 3RP health reporting.

- The presentation included coordination structure for the refugee response in Egypt.
- The presentation highlighted the Dashboard reports and their key features, which included, a deadline for data submission being the 10th of every month, emphasizing selected indicators, highlighting key activities that the partners conduct, and the need for progress updates from partners.
- Recommendations were made to continually give updates about funding and partners were reminded that Dashboards are easily shared externally, and that reporting about resilience should be happening on a quarterly basis.
- The presentation also underlined the Syrian Inter-Agency Reports; this included a deadline for data submission by the 10th of every month and a reminder that this document is public, the importance of inter-agency communication and how essential resilience reporting is when available.
- Finally the presentation provided some suggestions about moving forward with 3RP and ways to improve the plan.
 - There are 5 main indicators what will be used by all, but each group will use other indicators as well.
 - The more data shared the more visibility there will be at the national level.
 - The need to identify PH facilities used by different agencies to reduce overlap in reporting.
 - Interlinking the information system within the Health Working Group.
 - Focus on monitoring, tracking and reducing gaps between agencies /reduce overlaps in reporting.
- Activity info as a uniform platform for data collection was proposed to improve inter-agency coordination.

3- Operational Updates from Partners:

- **IOM**
 - Reported on its going resettlement proceedings in coordination with UNHCR for Syrian refugees to countries that include New Zealand, the UK, Germany, Sweden and France
 - Detention and detainees care responses keep following the set coordination matrix for medical and non medical actors including ; UNICEF, Caritas, MSF , AMU and PSTIC supporting detainees with; meals, Non Food Items NFIs, medical care, chronic illnesses medications support inside detention and referrals for emergency cases if and when allowed by the detaining Police station authorities

- **MSF**
 - Working on mental health coordination with an MoU being addressed with PSTIC and is in progress
 - Has recently seen an increase in the number of SGBV cases
 - Team in Alexandria is working to strengthen mental health coordination

- **ICRC**
 - New initiative that will target Palestinian refugees with outreach programs.
 - Assessing the needs of the Yemeni community, providing ad hoc assistance when possible
 - Assessing the long term situation of the Yemenis

- **Scarabeaus foundation**
 - Working in many sectors including health and mental health and in a multi-sectorial programming approach
 - Foundation focus is on aspects of capacity building and public and private health systems strengthening responses

- **Caritas Alexandria**
 - In addition to its ongoing health care services for Africans, Iraqis and Syrians, Caritas is working to extend health services to Palestinians as well
 - Coordinating health education sessions (diabetes)
 - Received a UNHCR training to implement a quality monitoring tool

- **UNFPA**
 - Starting training of doctors with ultrasound in Damietta
 - Facilitating outreach services for creating safe spaces for women/girls

- **WHO**
 - Working in cooperation with Ain Shams University to accomplish a Health Needs Assessment Survey
 - The survey training started on 18th of April
 - WHO is currently contacting heads of households to expand the survey into 5 governorates
 - Data collection of the Needs Assessment Survey is close to completion, ahead of data analysis and recommendations and issuing the need assessment report
 - WHO reminded HWG members to keep sharing info on Health facilities and services accessed by refugees to update the MOH services mapping software

- **UNICEF**
 - UNICEF shared that many actors are extending psychosocial and mental health care support in various governorates , however , there is a need to coordinate these responses to avoid duplication and overlap
 - Working with community health volunteers through the Ministry of Health to help Syrian families to deliver primary health messages and need to align the incentives support for CHVs as at time, it creates pull and push consequences between actors and projects

- **PSTIC**
 - PSTIC shared that its geographical scope covers all refugee residing governorates and will invite UNICEF , WHO and Scarabeaus foundation to its upcoming PSS working group to ensure increasing coordination around MHPSS responses

Summary of Action points:

Action	Lead Organisation	Deadline
1. All indicators must be clearly defined and agencies should agree upon common understanding of these indicators.	UNHCR	28 07 2015
2. Define how counting will be done for reporting and targets. All points to be clarified by UN agencies and NGO partners.	All UN agencies	28 07 2015
3. Change the number of primary healthcare facilities from 190 to 102.	UNHCR	28 07 2015
4. Notify UNHCR if agency data is not correct in the dashboards.	All 3RP partners agencies	28 07 2015
5. Training on Activity Info preparations will be made during July.	UNHCR	28 07 2015
6. Each agency should provide a list of supported facilities and a complete list of services provided to make any needed adjusted on the 3RP indicators if needed by cross checking the shared list of MOH PHC facilities	All UN agencies	28 07 2015

Others:

Next HWG meeting will tentatively convene on:

Date: Tuesday, 28th July 2015

Time: 10:00 am

Venue: UNHCR office in Zamalek.