**Reproductive Health Sub-Working Group Meeting Minutes**

**Date:** Thursday 18th Oct

**Venue:** UNFPA Jordan CO

**Time:** 09:30-11:30

**Attendance:**

1. *Ali Al-Gharabli - UNFPA*
2. *Faeza Abu Al-Jalo – UNFPA*
3. *Adea Serraus- Ainza*
4. *Nadia Safadi - MOH*
5. *Haneen Abulaila- MEDAIR*
6. *Tricia Vanntter - MEDAIR*
7. *Nawal Najjar – IRD*
8. *Tawfik Yousef – TDH Italy*
9. *Lubna Shannis – Caritas*
10. *Ranad Al-Fakhoury – Caritas*
11. *Lina Hmeidi – AMR*
12. *Neveen Al-Samhoury- IFH*
13. *Dina Jardaneh- UNHCR*
14. *Rana Sabha –SCJ*
15. *Razan Mousa – IMC*
16. *Nisren Bitar – HSD*
17. *Tala Dabbas – JHASi*
18. *Buthina AL Khatib – UNICEF*

**Agenda:**

* *Welcoming remarks*
* *Follow up on last meeting action points*
* *ActivityInfo (RH Indicators)*
* *RH Services Mapping Tool*
* *RH Coordination Updates (Zaatari and Azraq)*
* *AOB & Agency Updates*

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| * Follow up on last meeting minutes:
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|  | * ***Coordinator is to share the CMR mapping tool: finalized and will be shared after the meeting***
* ***To share the presentation for GBV IMS project: will be shared after the meeting***
* ***To share the nutrition mapping matrix: finalized and will be shared after the meeting***
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| * ActivityInfo (RH Indicators)
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|  | *ActivityInfo report was generated covering the period from January until September 2018 to look at achievements and challenges.* *The RH indicators chosen to be demonstrated were:** *# of antenatal care visits provided for WOMEN (>=18), # of antenatal care visits provided for GIRLS (<18)*
* *# of deliveries in presence of skilled attendant*
* *# of beneficiaries received modern FP methods*

*The report shows that some agencies working in provision of RH services are not reporting on ActivityInfo. This major gap hinders achieving targets. The missing agencies from the report are:* * *JWU*
* *JICA*
* *TAKAFUL*
* *Islamic Help*
* *PUI*
* *Emirates Red Crescent (Mafraq)*

*The discussion defines the RH indicators on ActivityInfo and focuses on universal definition for the following indicators:* * *# of WGMB SGBV survivors who access medical care*
* *# of health care providers trained to provide clinical management for GBV survivors*

*The RH SWG will work with the HSWG in order to contact missing agencies to report on their provided services noting that this also applies to non-JRP agencies.* *The achievements of all indicators for 2018 will be presented early 2019, and will be covering all indicators.*  |
|  | * ***RH SWG is to encorge all actors to report on indicators as per their activitiies and to ensure timely reporting.***
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| * **RH Services Mapping Tool**
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|  | ***UNFPA:*** * *This mapping sheet will serve as a reference for the group and will be reported to the Health Sector. It will also be transferred to a visual tool as part of the 2019 planning.*
* *The sheet is expanded through the HSWG mailing list to include all agencies providing RH services.*
* *The spreadsheet is also expanded to Zaatari RH Coordination group.*
* *All agencies are encourages to verify their inputs.*
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| * RH Coordination Updates (Zaatari and Azraq)
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|  | ***Zaatari Camp:******UNFPA:**** Reached 10,000 deliveries in Zaatari Camp (Live Birth) in UNFPA clinic run by JHAS.
* No maternal deaths for delivery inside the camps
* Now using new RH cards that has been given to all actors to unify the data and the collection of the cards which contains neonatal, postnatal, delivery, previous obstetric history, and note for the referral.

***Azraq Camp:******UNFPPA:**** The RH coordination meeting is taking place in Azraq camp on monthly basis.
* The group ensured the importance of following the anemia management during pregnancy protocols and the availability of iron supplement at all villages.
* Blood sampling new procedures at the level of PHC is in place and is being tested to elevate the unnecessary burden on the main laboratory at the Azraq Hospital.
* Agreement for distribution of RH new card is now in place for all RH actors.
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| **Action Points** | * ***N/A***
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| * **Agency Updates:**
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|  | ***UNHCR:**** *The neonatal death report for Q3 is still now drafted.*
* *It will include stillbirth audit starting June 2018.*
* *Questionnaire still need some improvement to include more questions of the maternal part related to stillbirths.*

***UNICEF:**** *National neonatal death audit system is being piloted in 5 hospitals with MoH.*
* *The system will be functional early next year.*
* *Neonatal screening now includes beta thalassemia, G6PD deficiency and Phenylketonuria.*
* *Response and proper counselling following neonatal careening is a challenge.*

***HSD:**** *Continuation of support to MCH access and quality services at hospital and clinics level is still ongoing*
* *Medical eligibility wheel is being updated under MoH supervision. The new version will be in Arabic and will include all eligibility criterion for using contraceptives.*
* *The new wheel which gives information for both clients and healthcare provider on the best FP method to be used.*
* *The new version is based on 2015 WHO version, 2018 FP Handbook and the UK eligibility criteria 2016.*
* *The wheel will include all methods used or introduced in Jordan*

***IMC:**** *CH platform has been formed and 1st meeting took place on September 3rd and IMC will be co-chairing.*

***IRD:**** *Community Health messages to CHW is being disseminated along with RH messages.*
* *Conduct awareness session to women in Zaatari.*

***SCJ:**** *Conduct a community training to ensure that CHW deliver the right messages.*
* *Assessment to pregnant and lactating women to follow on ANC, PNC and FP visits.*

***MoH:**** *Trainings on IUDs and Implanon is ongoing.*

***IFH:**** *Trainings schedule will be shared with the group for the next meeting.*
* *2 brochures on pregnancy danger signs and maternal health is being produced.*

***JHASi:**** *The laboratory at Z3 maternal unit is to open which will be providing all related tests for RH cases. This will provide better services and limits referrals.*

***UNFPA:**** *CMR training now included health care providers from agencies working in host communities. This include IRC from Mafraq and JHASi from Madineh clinic.*
* *CMR is a still challenge noting the high turnover so UNFPA will be including Family Medicine Specialists and Medicolegal Doctors.*
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| **Action Points** | * ***UNHCR is to share the Q3 draft report for neanatal death audit which includes stillbirths.***
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| * **AOB**
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|  | * *Post Exposure Preventive (PEP) kit is available from WHO to be donated. Interested agencies are asked to approach the coordinator.*
* ***Next RH Meeting 22nd November at UNFPA***
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