# Health Sector Strategic Advisory Group for the Humanitarian Response

# **Terms of Reference**

# **Background:**

Within the overall coordination approach to the Syrian refugee response in Jordan, the Health Sector brings together different UN agencies, national and international NGOs, donors and government actors who are all working to support the continued provision of essential health services to Syrian refugee women, girls, boys and men. Coordination is an essential part of the humanitarian response, with the aim of avoiding unnecessary duplication of service delivery and identifying gaps where services are most needed.

With the Syrian crisis in its third year, the evolving humanitarian context poses new demands on health systems in Jordan and consequently on the Health Sector, and there is a need to strengthen planning and coordination even further to ensure an appropriate response. This includes strengthening national capacity to cope with the increased numbers of those requiring health services, improved collection and analysis of data and dissemination of information, implementation of emergency preparedness and disaster risk reduction, better alignment of international responses with national structures and strengthening the link between the humanitarian and the development responses. Thus, the formation of a Health Sector Strategic Advisory Group (HSSAG) was proposed, in order to better respond to this increased demand.

#### **Function:**

The function of the HSSAG is to provide technical and strategic support to and increase ownership and joint accountability within the Health Sector. The SAG will facilitate the review of Health Sector performance and propose actions for streamlining activities, as well as consider critical issues and present solutions, options and ways forward, to be decided upon only after consultation with Health Sector members.

### **Objectives:**

### Strategic Planning and Implementation of humanitarian response:

- 1. Support and facilitate the Health Sector in further defining its structure and priority functions
- 2. Review the Health Sector ToRs
- 3. Assist in developing the health sector work plan for 2014
- 4. Assist in development of the contingency plans
- 5. Assist the Health Sector leads to draft the health sector strategy by proposing strategic direction for the Health Sector
- 6. Advise the health sector leads on the process for development of the RRP revisions
- 7. Conduct regular analyses to assist in identifying gaps or areas for improvement in the Health Sector response
- 8. Advise on funding allocations for emergency response fund and other pooled funds

#### Assessments and Research<sup>1</sup>

1. Review planned assessments for justification and indications, methodology, ethical principles, and coordination with existing or planned assessments;

<sup>&</sup>lt;sup>1</sup> The role of the SAG in reviewing and approving Needs Assessments and Research relating to health does not replace the Governments core function in providing approval. It is to ensure that refugee rights are recognized and the particular vulnerability of refugees is considered in the planning design and conduct of assessments and research and to ensure a coordinated approach.

2. Review proposed research relating to health amongst refugees and ensure agreed criteria are met.

#### Advocacy:

- 3. Work with the Health sector group to identifying health issues that require advocacy
- 4. Support and facilitate development of key Health Sector advocacy messages;
- 5. Ensure that advocacy issues identified by the sector are communicated to the appropriate parties /fora;
- 6. Monitor that reports and other publications of the Health Sector (e.g. Regional Response Plan, RRP reports, are in line with agreed advocacy messaging.

# **Application of standards:**

- 1. Promote and facilitate the application of international standards such as gender equality and human rights within the health sector response
- 2. Promote and facilitate the inclusion of cross-cutting themes such as gender, disability, age and others in sector activities and strategies;
- 3. Facilitate and support application and adherence of relevant national and international standards and evidence based best practices by the Health Sector in the humanitarian health response in Jordan.

### Linkages with other coordination mechanisms including the Inter-sector Working Group

- 1. Ensure linkages of the health sector with other coordination mechanisms and structures e.g. National Emergency Committee (Chaired by Ministry of Health), Host Community Platform Health Task Force, and field-based health coordination mechanisms;
- 2. Agree on key issues to be raised to the Inter-Sector Working Group.

#### Membership:

Membership is voluntary, and the committee will have between 4 to 5 members (in addition to sector chairs), ensuring balanced representation of the Ministry of Health, UN agencies, national and international NGOs, and donors. Agencies should have an established presence working directly in the country and be registered. Members will have strong technical competencies as well as established/proven humanitarian response capacities in key areas of humanitarian health and nutrition response and broad strategic perspective and be empowered to make decisions. They should be familiar with the main current health issues facing populations and health systems in Jordan and the ways they are being addressed. The members will not act in the interest of their own organization but rather use their broadly-based experience in the interest of the Health Sector as a whole.

While voluntary, membership entails active participation in the coordination of the health response, and members are expected to attend meetings as well as actively engage in the drafting of documents, strategies and policies as required.

#### **Management Support:**

UNHCR will provide necessary administrative and logistic support for the functioning of the SAG. Similar support from other members of the committee, while not mandatory, is encouraged in order to ensure not only equal distribution of tasks but also joint ownership of the processes.

#### Members:

To be nominated and selected, with the possibility of rotational membership every 6–12 months. Current members are MoH, UNHCR, WHO, IMC, MdM, Handicap International, UNICEF, UNFPA and USAID.

## Method of Work:

Health Sector Steering Committee meetings will be chaired by the Health Sector Leads. The Committee will meet at least once a month, one to two weeks prior to the regular coordination meetings. The committee may need to meet more often during the important planning periods (Strategic Planning, Contingency Planning, Regional Response Planning, etc.) as well as deterioration of humanitarian situation / new emergency. Members are requested to attend the meetings in person, or send a suitable representative.

Agendas of upcoming meetings will be shared with members at least 24 hours prior to meetings, and summaries of key points/issues raised during the meetings will be circulated within 72 hours.

The SAG will report back to the Health Sector meetings monthly on outputs, progress and new developments.