

Reproductive Health Sub-Working Group Meeting Minutes

Date: Thursday 19th July
Venue: UNFPA Jordan CO
Time: 09:30-11:30

Attendance:

1. *Ali Al-Gharabli - UNFPA*
2. *Faeza Abu Al-Jalo - UNFPA*
3. *Elsa Groenveld - MEDAIR*
4. *Neveen Al Samhoury - IFH*
5. *Federico Turchetti – TDH Italy*
6. *Razan Mousa - IMC*
7. *Rachel Howard – IRC*
8. *Dr. Hanan Najmi – MoH*
9. *Bahaa Mohaidat -UNFPA*
10. *Buthina Al Khatib – UNICEF*
11. *Dima Hamasha - UNFPA*

Agenda:

- Welcoming remarks
- Follow up on last meeting action points
- Clinical Management of Rape Services (Roundtable Discussion)
- Camp RH Group Updates
- AOB & Updates

✓ Follow up on last meeting minutes:

- ✓ *Coordinator to share the CMR mapping tool with all members: **Done***
- ✓ *Coordinator is to finalize and share the nutrition-mapping tool with the nutrition sub-working group: **Done***

✓ Clinical Management of Rape Services (Roundtable Discussion)	
	<p>Purpose: Clinical management of rape services should be urgently mapped, thus ensuring their inclusion in SGBV referral pathways. It is recommended to ensure availability in urban location and conduct facility based trainings (in both government hospitals as well as NGO run clinics) to ensure all relevant staff are trained, training to be followed by monthly coaching sessions. Advocacy should be undertaken with ministry of health on good practices in the field of CMR and in particular joint examination by forensic and CMR doctor (if survivor wants to file complaints) thus ensuring the survivor does not undergo multiple exams which leads to re-traumatization. FPD staff to be further sensitized on importance of CMR services.</p> <p>Points of Discussion:</p> <ul style="list-style-type: none"> - As with the MISP, clinical care for rape survivors should be available from the earliest onset of an emergency. It is the responsibility of health actors to ensure that health staff is trained and health facilities are equipped to provide care to survivors. This includes having a clinical management of rape protocol in place. - It is the role of those working in S-GBV to provide support to the health actors in sensitizing medical and non-medical personnel to the diverse needs of survivors, and promoting compassionate care. S-GBV actors also facilitate coordination with health and other sectors to ensure survivors receive all needed services. GBV actors without a medical background do not provide any direct health services, procure or dispense drugs, or supervise health staff. - Health and S-GBV actors should also work in concert to ensure that all actors on the ground are informed of existing national guidelines and protocols for the clinical management of rape, to ensure that all actors are providing appropriate health responses to survivors of rape <p>Mapping Tool: The RH SWG along with the S-GBV SWG developed a mapping tool on a spreadsheet to allocate SMR services, who is providing what and where. The group agreed to fill in the tool and finalize it by September.</p>
	✓ <i>Coordinator is to share the CMR mapping tool</i>

✓ Camp RH Group Updates	
	<p>Zaatari Camp:</p> <ul style="list-style-type: none"> - IRD provided a brief presentation on the new project of “Community Training Centre” supported by UNFPA and explained the RH related topics and trainings that are to be provided. - The group also discussed the referral between RH facilities for unavailable RH services and the referral of cases on 36 weeks of pregnancy, before or after to the UNFPA/JHASi RH & maternity clinic - D5 - Next RH Coordination group meeting in Zaatari Camp will be 14th August. <p>Azraq Camp:</p> <ul style="list-style-type: none"> - The group advocated for IMC and IRC to expedite the process to sign the MoU in order to have a complete RH services especially RH essential medications provided to the beneficiaries. - The group also discussed referral challenges, (Patients feedback collection process) and proposed a new arrangement to relief the burden on the hospital lab. Further discussion among the group is needed. - Next Azraq Coordination meeting will be 6th August
Action Points	✓ N/A

✓ **Agency Updates:**

Commented [AA1]: Agencies who wish to add July updates should contact the RH SWG Coordinator

IRC:

- IRC will be moving out from village #2 and handing over to AMR
- Finalized the contract of private hospital in Irbid (Contract was signed) expecting to start the services by next week
- Referrals are accepted from partners in Ramtha and Mafraq clinics. (matching criteria)
- Evening shifts in Mafraq and Ramtha by end of JUN with full package of RH services. (1 till 6 pm)

IFH:

- The next training on Infection Prevention, which will be held on the 29th – 31st July Geneva Hotel.

UNICEF:

- Lack of attendees of the last NWG meeting, so every partner is encouraged to attend the meeting (Every third Tuesday of each month)

MEDAIR:

- Fund was received from ECHO and OCHA to continue cash for health project and cash for deliveries
- The target was increased for next year and open for referrals in mid of JUL

Action Points

✓ *N/A*

✓ **AOB**

- *Next RH Meeting 16th August at UNFPA*