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

**Date:** Thursday 22nd Nov

**Venue:** UNFPA Jordan CO

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

**Attendance:**

1. ***Ali Al-Gharabli - UNFPA***
2. ***Faeza Abu Al-Jalo – UNFPA***
3. ***Dina Jardaneh - UNHCR***
4. ***Nidal Massadeh – UNHCR***
5. ***Elsa Groenveld – MEDAIR***
6. ***Tricia Vanntter - MEDAIR***
7. ***Nawal Najjar – IRD***
8. ***Federico Turchetti – TDH Italy***
9. ***Mahmoud Mousa – Huimaiterra***
10. ***Chiara Lorenzini- Humaniterra***
11. ***Rana Sabha –SCJ***
12. ***Daphne Mular – SRD***
13. ***Khaled Abulamoun – IRC***
14. ***Rana Sabha – SCJ***
15. ***Neveen AL Samhoury – IFH***
16. ***Heba Sedr – PUI***
17. ***Walid Al Zoubi –JPS***
18. ***Sajeda Abu Zeid - JPS***
19. ***Razan Mousa – IMC***
20. ***JAved Ali - IMC***

**Agenda:**

* Welcoming remarks
* Follow up on last meeting action points
* Clinical Care for Sexual Assault Survivors (CCSAS)
* AOB & Camp Updates

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| * Follow up on last meeting minutes: | |
|  | * ***UNFPA to share the presentation of JPFHS with all partners:*** ***Done shared*** * ***To share the nutrition mapping matrix: Done shared*** * ***To share the CMR mapping tool: Done shared*** * ***UNFPA to share the DHS prsentatin: Done shared*** * ***The annual report of nunetal and death audit report (outcomes of 2018): to be presented by early 2019*** * ***HSD to share the findings/achievments of the client service station (Presentation): Pending*** |

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| * Clinical Care for Sexual Assault Survivors (CCSAS) | |
|  | * *The CCSAS Multimedia training tool was produced in 2008 by the International Rescue Committee (IRC) and the University of California, Los Angeles (UCLA).* * *A multi-country evaluation of the CCSAS tool was carried out in 2012.* * *This evaluation showed that further training on psychosocial care approaches was needed for health workers to provide quality support to survivors during their medical exams* * *Then the new toolkit has been reviewed and the PSS toolkit was added to the 2018’s kit aiming to respond to these specific gaps in the CCSAS multi-media training tool.* * *In 2014, IRC has worked through the support from UNFPA and other actors translating the toolkit into Arabic, with more consideration to the cultural context issues.* * *The goal of this multimedia educational program is to improve clinical care for and general treatment of sexual assault survivors by providing medical instruction and encouraging competent, compassionate, confidential care.* * *The training is not meant to teach basic medical information; it is skills based training designed to help medical professionals and clinic staff better communicate with and serve survivors of sexual assault.* * *The program is intended for both clinical care providers and non-clinician health facility staff.* * *It is designed to be delivered in a group setting with facilitators guiding participants through the material and directing discussions and group participation as appropriate.*   ***The Toolkit is divided into five sections*** *1. What Every Clinic Worker Needs to Know.*  *2. Responsibilities of Non-Medical Staff.*  *3. Direct Patient Care.*  *4. Preparing Your Clinic.*  *5. Forensic Examination.*  ***The IRC Online CCSAS training Platform:***[***https://ircelearning.talentlms.com/unit/view/id:3336***](https://ircelearning.talentlms.com/unit/view/id:3336)  ***The IRC Online CCSAS training Platform:*** [***https://ircelearning.talentlms.com/unit/view/id:3336***](https://ircelearning.talentlms.com/unit/view/id:3336)  ***The presentation link:*** [***https://goo.gl/WH7zv3***](https://goo.gl/WH7zv3) |
|  | * ***UNFPA to sahre the presentation with all partners*** |

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| * RH Coordination Updates (Zaatari and Azraq Camps) | |
|  | ***Zaatari Camp:***  ***UNFPA:***   * *The last meeting was held with some agencies could not attend as those meetings are urgent in order to know regarding the implementations of RH services in the camps.* * *In the last meeting, a discussion was posed on protocols on how to provide long acting heparin for certain cases.* * *Established a lab at the maternity clinic in Zaatari Camp run by JHAS for all pregnant and lactating women, and also the referral mechanism was discussed with the partners for any RH cases referral.* * *As a challenge, the provision of blood transfusion in the Moroccan Field Hospital and will be discussed during the next meeting.*   ***Azraq Camp:***  ***UNFPPA:***   * *The coordination meeting was held on the 5th Nov* * *Agreement between IMC and IRC to provide medications for the RH cases through IMC primary health care pharmacies.* * *At the hospital level, a special procedures to avoid referring patients for blood sampling in the hospital level, as there will be a certain mechanism for at the village level on sending blood samples to hospitals and getting back.* * *The technical meeting of updating the referral for the hospital on the 36 weeks, in order to keep the SOSP for referral or shifting to 37 weeks (to have less burden on the hospitals having many cases, and empowering the RH clinics)* |
| **Action Points** | * ***N/A*** |

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| * **Agency Updates:** | |
|  | ***IRC:***   * *Continue the RH services and primary health care in Zaatari Camp* * *In Azraq Camp continue the RH services in village 3, 5 and 6* * *Closed the cycle of supporting the complicated and obstetric cases in August and will restart the services again with MEDAIR and UNHCR to support complicated and high-risk cases for Syrian Refugees upon MoH criteria of defining high-risk cases.* * *Referral is open to IRC by any partner* * *Will start comprehensive primary health care in Irbid.* * *Training package and material available with three master trainers to train the staff and health care providers.*   ***Plan international:***   * *Currently have two projects working under RH and Sexual health rights.* * *Working with IFH in their centers in Jarash and Karak* * *Working with youth and adolescents to empower them and protect against GBV*   ***MEDAIR:***   * *The meeting is every three months.* * *The next meeting will be Tuesday 9th OCT, and it will discuss the TORs for Community Health Volunteers*   ***PUI:***   * *Approval granted from MOPIC for the cash for health project running in Jarash, Ajloun Salt and Madaba.* * *Will support 1000 women for CS and Normal deliveries*   ***IRD:***   * *For the community and training center in ZC, a training was conducted for SCJ CHV (20 CHVs) on the CHV manual* * *Conducting a training on building the capacity of postnatal for the health professionals (26th Nov) and the neonatal will be on (29th Nov)* * *GBV session will be held on 29th Nov on GBV disabilities and youth workshop will be held on the end of this month.*   ***SCJ:***   * *Training on anemia for CHW, and started to make assessment on anemia for all pregnant women in Zaatari Camp (awareness raisings on anemia) and same will be included in Azraq Camp.*   ***Medair****:*   * *Cash for health projects are running normally and covering pregnant women and other health related cases, focusing on Syrians and there is emergency cash or Jordanians.* * *MEDAIR are open for any referrals.* * *The next Community health platform will be 4th Dec (MEDAIR and IMC) at 11:00 at IRC*   ***Humaniterra****:*   * *Pediatric surgeries (two missions per month)* * *For patients in the camps, HumaniTerra is intending to follow up for patients and will be training program for medical personnel who is doing the follow up on the patients in the camps.* * *Working in Hanan Hospital and Basheer Hospital and operated 392 patients since DEC 2017.*   ***IMC:***   * *In Sep, IMC took over the maternity program from MSF in Irbid* * *Visibility level on the community is one of the main challenge facing in Irbid* * *IMC conducted around 300 deliveries and trying to increase the number of surgeries.*   ***JPS****:*   * *JPS has ongoing project activities in support of secondary and tertiary referrals from Syrian refugee camps (Zaatari, Azraq) and the borders for provision of EOC with access to NNC and childcare, lifesaving and medical care for the critically ill.* * *Still accepting referrals from the camps for neonatal care and secondary and tertiary care.*   ***UNFPA:***   * *Ali shared the Inter Agency field manual (newest and final version) on RH and partners needs to pay attention to this manual. MISP has been updated as well and a chapter was added regarding the logistics and procuring procedures* * *UNFPA will be sharing a template with the partners to indicate the needs for the coming year on the family planning commodities.* * *Partners were asked to update their activities mapping regarding the RH services provided to avoid any duplications.* * *Meeting with MoPIC at the level of ISWG was held at UNHCR, partners were advised if they are facing any challenges on the approval process to be reported to Ali.* |
| **Action Points** | * ***N/A*** |

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| * **AOB** | |
|  | ***Next RH meeting: 13th Dec at UNFPA*** |