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| **National Sexual and Reproductive Health Sub-Working Group meeting**  **October 27, 2021,**  **On behalf of the SRH SW Coordinator: Mr. Bouchta Mourabit – UNFPA Humanitarian coordinator**  **SRH SWG minutes taker: Ms. Dima Hamasha**  **List of partner organizations who attended the meeting: UNFPA, IFH, JHASI, Medair, IRC, AMR, JWU** | | | |
| **Item #** | **Agenda Item** | **Description** | **Action point** |
| **1** | **Review of the last meeting action points and meeting minutes:** | 1. – We discussed the National SRH strategy that will be launched by the end of the year. An initial date is booked on 12 Dec 2021 2. – JAFPP provided an overview of their work in their 20 clinics distributed all over the country. 3. – Oxfam shared an overview of their Masourana project. 4. – We discussed the SRH SWG logo and members’ feedback shared with the designer. |  |
| **2** | **Adolescent Sexual and Reproductive Health** | * + This presentation will be postponed till the next meeting due to non-readiness of the RHAS Nevertheless, Bouchta provided an overview about RHAS and UNFPA collaboration as highlighted below:   + Under the support of UNFPA:   + - RHAS provides awareness sessions and designs programs and curriculums to raise adolescents and youth knowledge and skills around SRHR in general, CSE and empower them to lead peer-to-peer education and youth-led initiatives.   + - RHAS is building the capacity of parents to learn more about adolescents' transitional period and how to speak about it that aims to create a new social norm where open and safe dialogue between parents and adolescents in collaboration with the Ministry of Health, and 8 Healthy Community Clinics (HCC).   + - RHAS is partnering with some universities to provide RH elective courses for students. Over the recent years, the number of registered students and involved universities has been increased, showing the big interest for these courses.   + - RHAS mobilizes different media platforms including investing in social media campaigns that raise awareness on youth SRHR and GBV. | To follow up with RHAS to make a PPP at the next meeting |
| **3.** | **Breast Cancer Awareness Month (5 min)** | * + **IFH updates:**   October is Breast Cancer Awareness Month, an annual campaign to increase awareness of the disease. Therefore, the Institute of Family Health (IFH) with the support of UNFPA conducted several awareness sessions about breast cancer for more than 200 ladies by qualified midwives and nurses in different locations all over the kingdom. The sessions aim to help them to protect themselves from the negative burden of this disease by early detection and treatment by raising their awareness about the disease, signs and symptoms, the importance of screening and early detection of the disease, the role of ultrasound and mammogram and their indications as screening tools. In total 70 cases were referred to perform Mammogram for further investigation.   * + **-JHASI updates:**   + JHASI provided Breast cancer awareness sessions and self-breast exam education with community working groups in the Zaatari camp. this activity was conducted with Questscope.   + **- JWU updates:**   JWU conducted 14 awareness sessions on Zarqa, Amman, and Irbid about the early detection of breast cancer and how to do the self-examination. | To coordinate with King Hussein Cancer Center for making a presentation to the group in next meetings. |
| **4.** | **Women’s Health Research Study (10 min)** | * + Dr. Asma from JU presented **“Anxiety and Depression last one Month after Miscarriage at Jordan University Hospital”**   + -Dr. Asma explained the difference between miscarriage and abortion. Miscarriage is a naturally occurring event called (spontaneous abortion) while abortion is induced.   + - This study aims to look into the rate of anxiety and depression in women attending Jordan University Hospital with the diagnosis of EPL immediately and one month later.   + - It is a cross-sectional study with a sample of 200 women between June 2018 and December 2019 with early pregnancy loss up to 13 weeks of gestation was studied.   + - In the study, we noticed that most of the women who stay anxious and depressed one month later were nulliparas, had recurrent losses, infertile, or and primigravida with advanced maternal age with IVF.   + - Conclusion:   + 1. Although anxiety and moderate to severe depression were transient in the majority of women (72% and 69%, respectively); still a proportion (5.5% had severe anxiety and 7% had moderate to moderately severe depressive symptoms) continue to suffer for one-month post-miscarriage or probably more.   + 2. Understanding the type and frequency of emotional reactions to pregnancy loss is important.   + 3. Screening is advised to target appropriate support to those who are in need, thereby minimizing psychological morbidity and its societal cost. Increasing medical staff awareness is needed   + Q1: Did you study the contributing factors that may affect the anxiety and depression level after miscarriage? Risky groups are primigravida, women who get pregnant at old age, and women with recurrent miscarriages.   + Q2: Did you study the length of the interval between miscarriage and the net pregnancy? No, we didn’t. Normally, it depends on the number of the existing children (whether the lady has other children or not), the husband’s desire, and the interference from the extended family such as mothers-in-law.   + Q3: What are the questionnaires that can be used to assess the woman’s risk to develop anxiety or depression?   + You can use the questionnaires used in this study and usually those who fall under moderate to severe risk, should be referred to mental health services. | For More Information, please review the presentation using the below Link:  <https://docs.google.com/presentation/d/1g2S7clrCkqiAGINC3FhtOgIhT2Ci-Glg/edit?usp=sharing&ouid=108410498961458072288&rtpof=true&sd=true> |
| **5.** | **SRH SWG members Updates** | Updates offered from   1. **JHASI:**    * -Total no. of deliveries is 14571. Total no. of deliveries during October until now 131.    * - JHASI provided Breast cancer awareness sessions and self-breast exam education with community working groups in the Zaatari camp. this activity was conducted with Questscope.    * JHASI continued to provide SRHR awareness sessions for adolescents and youth 2. **IFH:**   - training for our staff took place this week regarding the AMAL approach in order to start conducting young mothers’ club sessions for Syrian refugees (pregnant adolescents) all updates will be shared after completing these sessions.  AMAL approach (Adolescent mothers against all odds) this initiative is designed to meet the immediate needs of pregnant adolescents and first-time mothers in crisis-affected settings and address community consciousness and engagement around gender power and social norms as well. so it’s a good example of integration between SRH, GBV, and youth component   1. **UNHCR:**   - health access utilization survey, data collection finished and the final report will be finalized on November 2021. It will have considered as a baseline for non-Syrian refugees and a follow- up survey for Syrian refugees  - UNHCR and MOH are working on a manual on how to charge refugees seeking health care services in MOH clinics and hospitals.   1. **AMR:** in village 2, AMR started providing FP services after receiving an FP shipment from MOH. | * + - Bouchta suggested having the Breast Cancer Program do a presentation about their program and services and if they can support the Syrian refugees. Also, to check the ways of collaboration between the BCP and SRH SWG members. |
| **6.** | **SGFPN update** | Niveen attended the sectors gender focal points meeting on the 7th of October, it was the first meeting. Below you can find the agreed action points:   1. First of all, the SGFPN Co-chairs shared all documents regarding the induction package including the ToRs for SGFPs with FPs. 2. FP will contact the UNHCR Information Management team to grant access to download information to report on Gender Monitoring Dashboard in order to fill Gender Monitoring Dashboard templates for Q1, Q2, and Q3 by the end of this month. 3. On the other hand, the Health Sector Chair still has to nominate an SGFP representing Health Sector 4. The Exercise for SGFPs to input into the drafting of multi-sectoral gender profiles was postponed until the Gender Monitoring Dashboard exercise for Q1-3 is completed and the training also was postponed to be conducted early in Q1 2022 or maybe in Q4 this year. All information regarding this matter will be shared after the next meeting. |  |
| **7.** | **SRH WG – Overview Monthly Data & Service Uptake** | * + - There are 12 organizations that entered their data into the activity info. Platform in October. Reported activities are being implemented in 12 governorates around Jordan.   + - The difference between the received and required budget for 2021 is around 46K.   + - We can see more reported cases of SGBV survivors who access the medical services which is a good sign of the integration between SGBV and SRH services.   + - The number of beneficiaries reached with awareness services- this indicator is overachieved and it is worth exploring the impact of these awareness activities on the access to services and utilization. | * + - We encourage all agencies to report their data on the activity info.   + - Check with UNHCR if MOH can report.   - Please check the below link for more information:   * + <https://docs.google.com/presentation/d/1dt_ZCccDuBAtD9MP-OVWMPhEJ_P2fkwd/edit?usp=sharing&ouid=108410498961458072288&rtpof=true&sd=true> |
| **8.** | **AOB**  **New SRH SWG Logo** | The new logos were presented in the SRH SWG meeting.   * + The majority choose the second option.   + cid:17cbcad4bc0e7e5fb141 |  |
| **9.** | **Activity-Info database** | -The ActivityInfo. Monitor database is open to report your achievement for the period of January- October 2021. The ActivityInfo Monitor database will be closed on 10 November 2021. | All partners are encouraged to enter their data before the 10th of November 2021. |
| **10.** | **Referral training** | Jordan River foundation conducted safe referral training. The last training will be conducted on the 21st of November 2021.  Those who are interested can contact [y.ghnaim@jrf.org.jo](mailto:y.ghnaim@jrf.org.jo) |  |
| **11.** | **Global School on Refugee and Migrant Health** | * + An online training about the Global school on refugee and migrant health is currently ongoing “25th -29th of October 2021” |  |

**The next SRH SWG meeting will be on November 24, 2021, from 10 to 11:30**