| **National Sexual and Reproductive Health Sub-Working Group meeting**  **December 15, 2021**  **SRH SW Coordinator: Ms. Jihan Salad**  **SRH SWG minutes taker: Ms. Dima Hamasha**  **List of partner organizations who attended the meeting: UNFPA, IFH, JHASI, Emphnet, IMC, Soldiers families welfare society (SFWS**)**, UNHCR, SCJ,** | | | |
| --- | --- | --- | --- |
| **Item #** | **Agenda Item** | **Description** | **Action point** |
| **1** | **Review of the last meeting action points and meeting minutes:** | * Introduction of new members.  1. Dr. Yusuf Khader, Director/ Center of Excellence for Applied Epidemiology, Emphnet. 2. Dr. Ahmad Abdel Noor, Pediatrician in SFWS. 3. Dr. Hamdan Al-Maadat, AMR 4. Batool Alkhalili, Health coordinator in save the children  * Last meeting:  1. An introduction about the breast Cancer program in Jordan. 2. EmONC assessment will be conducted at the national level next year. 3. Partners updates and the activity info data presentation 4. The World prematurity day. 5. 16 days of activism. 6. Maternal Mortality guidelines endorsement 7. SRH Two-Day Symposium (12 – 13 December 2021) 8. Universal Health Coverage Day (12 December 2021) |  |
| **2** | **Launch of the new National Sexual and Reproductive Health Strategy 2020 – 2030 (5 min)** | The Launching of the new National Sexual and Reproductive Health Strategy 2020 – 2030 was on 12 and 13th of December,2021  The goal is to ensure full access to comprehensive and quality SRH services and information.  There was attendance from SRH service providers working across the country including, governmental, NGOs, civil society, academia. |  |
| **3.** | **Neonatal Death and Stillbirth audit report findings** | * The report includes an analysis of the number of stillbirths and neonatal death, causes, and the corrective measures to help the decision-makers to take decisions to address the causes and avoid such deaths in the future. * A total of 9 neonatal deaths and nine stillbirths were reviewed. * Out of 9, 2 cases deliver at the home. * Prematurity, milk aspiration, congenital anomalies, respiratory distress were the causes for these deaths. * Delay in deciding to seek care, delay in reaching care, and delay in receiving adequate care were identified as the main delays that contributed to these deaths.   **Discussion:**   * It is better to have a breakdown of the deaths based on the time of death (within 24, 48 hours, or five days…etc.). Emphnet will consider this in the upcoming audit report. It will be divided into early and late deaths. * It is important to train healthcare providers on NRP. * There was no comparison between previous years and the current year; this is something to be considered. * It is better to present the deaths as rates rather than numbers. * It is recommended to apply the COVID-19 protocol to decrease the deaths related to COVID-19. * The report’s outcome will be discussed at the camp level to address the recommendations of this report. | For more information, please use the below link.  <https://docs.google.com/presentation/d/1dftPw8yoVbQe3JeOC0eDfrEFszJ-R7Zv/edit?usp=sharing&ouid=108410498961458072288&rtpof=true&sd=true> |
| **4.** | **SRH Programme – International Medical Corps (10 min)** | * IMC started operating in the Azraq camp in 2015. * They operate 24/7. * In 2020, IMC established a COVID-19 center near the hospital. * IMC provides many medical services such as maternal and child health, family medicine, general surgery, and dental services. * IMC is responsible for the referral services to affiliated hospitals. * IMC coordinates with Zarqa National blood bank to receive the needed blood products. * Referral of pregnant women normally happens at 36 weeks. The earlier referral will be for high-risk cases. | For more information, please use the below link.  <https://docs.google.com/presentation/d/1djC_kzILw9hbhqtvUMpXCkNUiROloblQ/edit?usp=sharing&ouid=108410498961458072288&rtpof=true&sd=true> |
| **5.** | **SRH SWG members Updates** | Updates offered from   1. **JHASI:**    * Currently, JHASI sent 4gynecologists to be trained on the Implanon insertion and removal. In the future, the Implanon can be offered as part of the method mix in refugees’ camps.    * Total deliveries: 14801. In November, 131 NVD.    * Total SRH services provided are 4623 2. **IFH:** No major updates 3. **SWFS:**     * The capacity building for psychosocial support activities started this month.    * FP services provided to Syrian and vulnerable Jordanian    * Psychological first aid and stress management services were provided to Syrian and Jordanian.    * Next year, SWFS will start providing service via the mobile clinic.    * Staff trained on psychological first aid and problem management. 4. **Azraq camp:**     * Pregnant/Lactating women are recommended to take the vaccine in the camp as per MoH guidelines    * Medical staff/EH commodities are available in all clinics and the hospital    * Referral between SRH clinics and the hospital for NVD/CS continues, as usual, the same applies for the referral outside the hospital.    * The Camp SRH Sub-WG meeting was conducted on the 25th of November    * The WG joined the Community Representatives meeting on the 30th    * The WG participated in the 16day of activism celebrity along with the protection and GBV stakeholder, where SRH educational activities were integrated | * + For more information about the SWFS work, please check the below link: <https://docs.google.com/presentation/d/1fHQTGDP2m-zHnOhxpqNWW_RfPa62nD2y/edit?usp=sharing&ouid=108410498961458072288&rtpof=true&sd=true> |
| **6.** | **SGFPN update** | * + The Gender Monitoring Dashboard has been completed for seven out of eight sectors, including sub-sector (SRH). The analysis indicated that all sectors used gender planning and monitoring tools (i.e., GAM, AGD, SADD). However, gender-disaggregated data was unavailable in some activities (e.g., family planning).   + The following key points were raised and recommendations made for future SGFPN planning in 2022:   + To Improve capacity building activities and gender-related training, preferably in-person and both in English and Arabic   + To Enhance SGFPs’ engagement with sectors including through the development of the Gender Monitoring Dashboards, Multi-Sectoral Gender Profile, and sector-specific gender work plans and training   + to Conduct mapping of overall gender equality initiatives/projects within all sectors. Use Gender Monitoring Dashboards as an advocacy tool.   + In 2022, focus on feasible and achievable activities.   + The challenges to finding data for sector meetings demonstrate the need to improve project indicators concerning gender further   + And finally, it was agreed that some SGFPN members will be on leave during the first week of January 2022, so the next regular SGFPN meeting will be scheduled for 3rd February 2022. |  |
|  | **AOB**  **SRH SWG 2022 Planning Meeting** | * + SRH SWG planning meeting planned to be conducted in January 2022. The proposed dates will be shared with the members to choose from. The meeting will be in person.   + Choose a specific parameter where SRH providers can report every month. Currently, the updates are shared verbally and through the activity info.   This can be considered for next year's coordination meetings. |  |

**The next SRH SWG meeting will be on January 26, 2022, from 10 to 11:30**