



## Disability and Age Sub-Working Group Minutes of Meeting

**Date:** Sunday, 28 April 2024

**Time:** 10:00 AM – 11:30 PM

**Venue:** Online

**Chairs:** Huda Al Shabsogh (UNHCR), Saba Al Masri (IOCC)

**Minutes prepared by:** Shatha Malhas (UNHCR)

**Participants:** UNHCR Amman, International Orthodox Christian charities (IOCC), (UNFPA), The Jordanian Hashemite Fund For Human Development (JOHUD), Generations for Peace, COOPI Jordan, Movement for peace, Institute for Family Health (IFH),( MPDL), INTERSOS.

### **Meeting Highlights**

#### **Agenda Item I. DASWG Co-chairs and HCD updates**

- Welcoming note by the Co-Chairs from UNHCR and IOCC.

#### **Agenda Item II. Guidelines to writing effective success stories by UNHCR**

**Presenter:** Huda Al Shabsogh (UNHCR)

- Tips for writing a success story. Assume the reader knows nothing about your program. Always go back to the purpose of the program. Tell the reader why and how the program was implemented. Describe the measurable results or how the project's success was achieved. Define the public value of a program.
- Why write success stories? to show how the fund or grant is used. To reflect on the positive and lasting impact on the lives of beneficiaries. To learn what works and what doesn't work. To measure up the impact on what we are doing so far— so that we can also benefit from lessons learned and best practices.

#### **Agenda Item III. Introduction on Gap Analysis**

**Presenter:** Martina Mannocchi (UNHCR)

- We would like to plan with DASWG members and conduct the gap analysis and identify the needs of people with disabilities and elderly during the current difficult financial conditions especially with the fact if decrease of funding and the main gaps. In May/June 2024) including the main gaps.

- It is important for all the members to update the service mapping including your projects, funding granted for 2024, and the targeted groups, pre-identifying the geographical gaps and potential population covered or not covered, plus the criteria of selection whether children with disability are included or not? Providing such information will be helpful to provide us with information on the grounds.
- To better coordinate with members on corrective actions with all the members.
- We are thinking to apply different types of data collection methods like Focus group discussions with people with disabilities and elderly.
- Or through partners if they can support with that data collection resources such as group activities and facilitate group- discussions. If you are interested, please coordinate with the co-chairs through e-mails and contact.
- We might also use the Kobo survey to gather more information on the needs and gaps. (In consultation with members and partners of course)
- If you have any creative ideas or activities on ways of collecting such information, please let us know if you have any recommended suggestions.

#### **Agenda Item V: Physiotherapy Pain School for Trauma-Affected Populations by IFH**

- The aim of the DIGNITY Physiotherapy Pain School for Trauma-Affected Populations (Pain School Treatment) is to work alongside people impacted by trauma and/or ongoing stress to strengthen their abilities to live meaningful and engaged lives despite pain and stress experiences.
- For Persons with persistent pain and stress experiences that interfere with their daily lives - Persons experiencing the biological, psychological, social and spiritual impacts of trauma or ongoing stress - Survivors of psychological trauma - Persons experiencing ongoing stress - The caregiver of person with disability - Older person.
- Pain School Treatment is that it aims to strengthen resiliency and functioning in persons impacted by both persistent pain and stress experiences, rather than addressing one of these in isolation. including interactive education, therapeutic movements, and techniques and activities that promote self-management.
- Treatment of persistent pain and stress experiences should ideally integrate peer support, like participation in group treatment services, to allow for peer-to-peer exchange and the normalization of pain and stress experiences.
- Treatment of persistent pain and stress experiences should involve therapeutic movement that: 1) gently and gradually addresses any changes associated with physical inactivity like limited muscle strength and endurance. 2)creates opportunities for exploring movements while self-regulating pain and stress experiences. 3) involves gradual exposure to increased physical and emotional challenges associated with movement.

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#### **Agenda Item IV: DASWG members/ partners updates and AOB**

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