

Protection Working Group Jordan

Date: 2nd of February 2021, Teams online meeting

Agencies present: AAH, ARCS, ARDD, Care, CRP, DRC, Embassy of Kingdom of Netherlands, ECHO, HI, ICMC, IRC, IFH/NHF, IMC, INTERSOS, IOCC, IOM, IRAP, JOHUD, MEDAIR, MSF, NRC, TDH-Italy, UN Women, UNDP, UNFPA, UNHCR

AGENDA:

- Update from the Co-Chair
- Review of partners comments on the PWG Strategy and work plan
- Briefing on UNHCR Return Activities
- Update on the access of non-Syrian to MOH health services
- Update from PWGs in the field and the Sub Working Groups of GBV/CP/MHPSS/PWDs/CFP TF
- Update from Partners

| Agenda item | Discussion points | Follow up action and focal point |
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| <p>Update from the Co-Chairs</p> | <ul style="list-style-type: none"> - Welcoming participants and discussing the agenda. | <ul style="list-style-type: none"> - MoM will be uploaded on UNHCR data portal: http://data2.unhcr.org/en/working-group/50?sv=4&geo=36 - Presentations will be shared with members |
| <p>Review of the PWG Strategy and Workplan</p> | <ul style="list-style-type: none"> - Discussed the strategy and the workplan during the last meeting. Several comments were included from different partners and organizations. Members were asked to review the workplan again and add any additional comments. - Many topics and objectives on capacity building were added to the workplan. - Included comments on priorities and one refugee approach to be discussed with the government. - Create official channels for interaction with other sectors like health, education, basic needs, etc. - Strengthening protection needs, conducting protection situation desk review, members to engage more in needs | <ul style="list-style-type: none"> - Members were asked to review what was included in the workplan and provide their feedback - Co-chairs will share the strategy and workplan for the feedback |

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| | <p>assessments, gap analysis, protection wintering activities, monitoring activities and other activities.</p> <ul style="list-style-type: none"> - Report on findings and strengthening the capacity of local authorities. - Update SoPs for humanitarian international actors. - Capacity building and training needs on PSEA, GBV, LGBTI and developing the training calendar. - Provide more protection mainstreaming trainings to other sectors like safe referral trainings. - Operational safeguards and avoid duplication on services, few ideas were included like using RAISE and the 4Ws. - Support of all partners is needed; they can nominate themselves in capacity building activities and any contributions. - Importance on doing a mapping to share knowledge and increase services that can be done. | |
| <p>Briefing on UNHCR Return Activities</p> | <ul style="list-style-type: none"> - UNHCR neither promotes or facilitates return activities, our role is to support and counsel returnees. Every return must be voluntary. - UNHCR mainly provides counselling for returnees and liaise with authorities at Jaber border, in addition to supporting returnees exiting the country without accompanying them. Transportation facilities are provided in coordination with IOM. - UNHCR monitors any developments in Syria. - In 2020, around 3500 refugees who are registered with UNHCR returned to Syria which is a decrease comparing to 2019. - Jaber border closed in 18 March 2020 and now it's re-opened for limited cases. - Return trends: initially security approval was required by the Syrian Embassy, but it was dropped after. Returnees need to do PCR tests and to have a certain amount of money. - Statistics: 49% of returnees are children, 25% are persons with disabilities, 52% are from Dara governorate and 16% are from Rural Damascus. - Most of returnees' male supporters and head of household remained in Jordan to support their families who returned to Syria. - Projections for 2021 depends on COVID-19 and travel restrictions. Not anticipating a large shift and expecting low returns. - Conducting surveys to gather reviews and concerns from refugees. - Planned activities: increase UNHCR's presence at Jaber border, established an office at the border to monitoring returnees. - Looking for ways to provide virtual counselling. | |
| <p>Update on the access of non-Syrian to MOH health services</p> | <ul style="list-style-type: none"> - Almost 9.000 non-Syrian PoCs registered with UNHCR started having access to health services since the beginning of 2021. Before non-Syrians had access to health services on foreigner rate with a high cost. | |

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| | <ul style="list-style-type: none"> - Multi donor account was established by many donors to reverse the process for Syrians at first and then with advocacy in June 2020 non- Syrian PoCs granted this access. Now they have an affordable cost for health services. - For secondary health care services like normal deliveries it costs 60 JDs and 200 JDs for Caesarean births, which is affordable for non-vulnerable PoCs. - Challenges: Non-Syrian PoCs need to show any document that proves their area of residence in order to benefit from health services, however the non- Syrians do not have any official documents other than the Asylum Seeker Certificate that does not show their address, unlike Syrians who have the MoI IDs. - Some non-Syrians were happy as they saw equality, but other groups were used to go to private clinics and find challenges accessing public hospitals like A Basheer and Toutanji in Amman and other hospitals in different governorates. - Advocacy efforts with MoH and UNHCR working on the proof of residence. - Secondary lifesaving services are supported by cash for health project. - Comments: - NRC: how many non-Syrian PoCs managed to access health services? What are their nationalities? Is this service only until the end of the year? There are about 7.000 non-Syrians who are not registered, how can we help them? - A: the service does not apply on non-registered beneficiaries as they need to have the asylum seeker certificate. Beneficiaries were from are all nationalities. Numbers of beneficiaries who received health care services are not available, we only have numbers of those covered by cash for health. However, numbers are still low as advocacy started in Jan 2021. In Southern governorates, Yemeni and Syrian PoCs are used to go to MoH hospitals except Aqaba and Tafila where there are military hospitals. | |
| <p>Update from PWGs in the field and the Sub Working Groups</p> | <ul style="list-style-type: none"> - GBV SWG: s joint CP and GBV meeting took place on the 26th of January 2021. The National Council for Family Affairs (NCFA) was present, and the main topic was child marriage and ensuring exchange of the work that was done in this regard and discussing child marriage in camps. The Supreme Judge Department did not release the data and statistics of underage marriage cases yet. There was an increase in child marriage cases after the lockdown, the main reason might be that people could not register during that period. Need to wait for official numbers for registered underage marriage cases. Working on MoM that will be uploaded on the portal soon. The next GBV SWG will be on the 16th of February to finalize the workplan and strategy. GBV SWG went to performance appraisal survey and it showed satisfaction of the frequency, content, and structure. Areas of improvement: 1) to continue the newsletter/ bi-weekly information sharing. 2) strengthen the links with sub-national | |

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| | <p>working groups. 3) strengthening the relation with the government and FPD. A full presentation of the survey will be presented. Link to GBV porta: https://data2.unhcr.org/en/working-group/72.</p> <ul style="list-style-type: none"> - MHPSS: discussed the update of ToRs during the monthly meeting and this week is the deadline. Achievements and challenges: looking to keep integration with other sectors and working groups. Work on the gaps including the developmental disorders in some areas. Hosted national agency to open a discussion and learn from their experience This year is the last year of the assessment of the action plan, it includes different actors including MoH. There is a need to keep enhancing MHPSS with the primary health care. Deadline for survey is on the 3rd of February, the survey will help for the new action plan. The 4Ws are available online on: MHPSS.net to help identifying gaps and finding out activities. - CP SWG: joint meeting with GBV SWG tackling early marriage and MoM are under review. CP SWG planning for the next meeting to discuss the workplan. CPIMS: thematic session in January on to child labour, it discussed different topics related to child labour per each agency and had an overview on trends. Orientation on child labour tool to be able to gather and collect information. Hosted NCFCA and highlighted the main issues. All task force members provided their analysis. Will have a meeting to discuss the analysis and gather more information to finalize the annual report. - Cash for protection TF: meeting in January conducting gap analysis that are finalized. Shared eligibility criteria after making the amendments, under the review of the TF members and will be shared with PWG once finalized. - Q: has anyone recently developed a report or a research about the violence against children in their homes by caregivers in Jordan? - A: it will be highlighted under CPIMS TF, so far no studies were done but hopefully will have this issue covered by discussing the root causes and impact on children. - Irbid office: 3 sub working groups met in January: 1) PwD. 2) CP GBV SWG, updating participants with achievements and challenges, and next meeting will discuss legal services. 3) Irbid coordination SWG discussing achievements and lessons learnt. - Azraq camp: first meeting last week discussing plans and achievements and areas to focus on like child labour and early marriages. Noticed behavioural changes with children like bullying, stealing and aggressive behaviour due to COVID-19 as | |
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| | <p>there were no activities and no schools, this will be the theme in the camp. Will have a theme for each month. In February, the theme will be on how to prepare children and parents for a safe return to schools. Each village has a focal point. Collaboration with education WG and had a meeting with UNICEF to make sure that health is being considered as well. Finalizing safety mapping exercise and a document for child marriage.</p> <ul style="list-style-type: none"> - Zatari camp had the first protection meeting, identified thematic areas that included community-based approach to identify gaps and potential areas and sustainable solutions. Key documents and updated 4 Ws. As for documentation, protection actors are supporting in delivering birth certificates. IBV CoC was endorsed with all IBV coordinators in the camp. - Mafraq office: coordination meeting in January to discuss planning for 2021, WG members shared their updates and agreed on the themes to be discussed per each month. Next month will focus on return to school and challenges that PoCs are facing. During the referral coordination meeting there was a discussion on reaching PoCs, winterization, trends and challenges. CP was included in the plan and how to overcome challenges and issues related to children. A survey was released covering the topic of children out of school. - PSEA network: focused on capacity building for the network, had series of Arabic and English trainings that reached a big number of participants and trained government staff from MoH, MoSD and others. Coaching and mentoring sessions with 34 participants attending these sessions. For March will show a video animation for PSEA for consultation with the network. Training for PSEA was very necessary and will provide the PWG with this training. The training takes 6 hours and will check the suitable date to be provided. - South: inter agency coordination meeting in January discussed service mapping and action plans for 2021. Livelihoods sector shared information for Syrian labours and promoted the need of having more projects in the south. Health and disability: Caritas started contacting PoCs and disseminating information, Caritas focal point will be available for counselling and referrals are available to support any health concerns. In addition to that, UNHCR health unit is working with external relations unit and Caritas. PwD in south especially in Karak advocated service providers to be presented in the south. - Disability Task Force: members agreed to combine age inclusion into the work of the group. The terms have been reviewed and it became the "Disability and Age Task Force | |
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| | <p>(DATF)". Accordingly, HelpAge and JOHUD have agreed to become the task force's technical advisors on age. Focal points on disability and age inclusion are going to be appointed to each sector's working group in the first quarter of the year. A DATF factsheet has been developed providing an overview of the situation of persons with disabilities and older people in addition to achievements and objectives of the DATF.</p> <p>DATF members updated the service mapping activity matrix and DATF co-chairs continue to share awareness information about COVID-19 and registration for the vaccine, in addition to policy documents and key messages from members. Analysis of the results of a short survey conducted with DATF members indicated that more work is needed to provide services to persons with disabilities and older people in remote areas and the Southern region of Jordan. ARCS presented a disability inclusion good practice during the first meeting of the year. Next meeting will be on the 10th of February 2021.</p> | |
| <p>Update from Partners</p> | <ul style="list-style-type: none"> - Care Jordan: shared the annual assessment for host community in Jordan in general and Azraq camp. A thematic fact sheet will be at the stage of design and will be shared with members. Providing livelihood activities and PSS services in different areas. - JOHUD: In 2021, JOHUD will continue working with vulnerable Syrians, Non-Syrians, and Jordanians through services and activities provided under different components as the following: <ul style="list-style-type: none"> • Provision of Assistive devices and rehabilitation services for people with disabilities and older people. • Homecare and shelter services for older people. • Psycho-social support activities including parents-child centre, group and individual counselling, elderly club, and the monthly awareness and recreational sessions through the support committees. • Social cohesion through community-based protection. • Early intervention through portage program. • School fees, kits, and transportation service for Non-Syrian Refugees. • Homework support classes for Non-Syrian Refugees. <p>JOHUD is Looking forward to a strategic relation with all partners and working NGOs to maximize the return of investment of all interventions with PoCs.</p> - JRS: offer cash assistant education and PSS, can't do home visits, assessment over the phone, working on a small project for elderlies, any cases above 65 years can be referred. refer to this email Ghufan.alott@jrs.net for elderlies above 65+ | |



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| | <ul style="list-style-type: none"> - NHF/IFH: providing case management for GVB cases, awareness sessions using remote methods, self-defence classes. In Zatari continue cash assistance for GBV survivors. Successfully provided case management for children and facilitated their commitment for education. Working to provide services for GVB cases, empowerment, and PSS for survivors. - IMC: CP services, new approach working with community committees to raise awareness on CP for the areas in their communities. Solving issues and challenges. Working in collaboration with UNICEF to have alternative care components. Finalizing alternative care guide containing tools and conducting assessments. Supposed to be finalized this week and will be shared with the working group. - ICRC: visits in places of detention and monitor the situation and treatment of detainees. Provide phone calls for refugees in camps to contact their families in Syria. Family reunification and families of missing people, trying to develop initiatives to assist in this matter. - JPS: health projects, referral and cash for health projects, refer cases and building capacity for PSEA, strengthening including partners to make sure that all beneficiaries are treated with dignity. Beneficiaries can reach directly for any complains or requests, dealing with confidentiality and taking proper protection methods and reporting. - Embassy of the Kingdom of the Netherlands: follow issues of refugees and migration and manage prospect partnership. A global partnership that NLD supports with UNHCR and other partners, covering three pillars protection, employment, and education. Keen to develop a dialogue covering the three pillars. | |
| <p>AOB</p> | <ul style="list-style-type: none"> - Would like to have all partners involved in applying the strategy and workplan. Interested partners can share their interest via email. | |