

**GBV SWG MoM – 26<sup>th</sup> of July 2022**

**Agencies present: APS, DRC, CVT, IFH/NHF, IOM, IRC, JRF, Medair, Meci, NOVIA, SOS, Takatoat, UNHCR, UNRWA, UNFPA**



**Agenda**

- **Coordination updates: Revision of ToR, gap analysis planning, ME toolkit and field coordinators**
- **IM updates: activity info indicators**
- **Menstrual Hygiene Management paper presentation-Takatoat**
- **Cash for GBV guidance consultation**
- **AOB**

Agenda items	Discussion	Action points
<b>Welcoming</b>	<ul style="list-style-type: none"> <li>- Welcoming participants and provide a brief on the agenda and housekeeping rules.</li> </ul>	<p><b>MoM will be uploaded on UNHCR's <a href="#">Data Portal</a></b></p>
<b>Coordination updates</b>	<ul style="list-style-type: none"> <li>- ToR can be found on the <a href="#">Data Portal</a> . Last update was in September 2021, and it needs to be reviewed at least once a year.</li> <li>- Aiming to keep the same objective of GBV SWG, however will make linkages with the development since the work of GBV is related to Jordanians and other nationalities. Will mention the nexus in the objective.</li> <li>- Regular members: national and international organizations, government, semi government-NCFA. Other members and researchers can be invited on exceptional basis.</li> <li>- UNHCR and UNFPA are co-chairing the GBV SWG. The leadership for co-chairing the SWG is open to interested members.</li> <li>- Members' responsibilities were reviewed and confirmed, members should contribute and attend meetings.</li> <li>- Reporting on ActivityInfo Database: all partners who appealed to JRP/3PR must report on ActivityInfo. Members who have questions or need help can reach out to Ramayana <a href="mailto:mahafza@unhcr.org">mahafza@unhcr.org</a> from IACU.</li> </ul>	<p><b>ToR: review the organigram and make a link to the nexus. Open the leadership for co-chairing.</b></p>

	<ul style="list-style-type: none"> <li>- Members who want to join the GBV SWG need to fill out the 4Ws and submit a request mentioning their profile.</li> <li>- Structure: the GBV SWG reports back to the PWG on a national level.</li> <li>- Updates: SAG will be removed and GBV IMS TF will be added.</li> <li>- Sub-national level: 4 SWGs in different locations.</li> <li>- Coordination with national stakeholders remains the same.</li> <li>- Gap analysis workshop will be conducted in person. Gap analysis is done every two years.</li> <li>- M&amp;E toolkit: next Wednesday a hybrid meeting @UNFPA with experts who worked on the toolkit. Will open the floor for any questions, doubts, challenges, etc. Available hard copies of the toolkit in EN and AR toolkit for members who will attend in person. Members are encouraged to look at the toolkit as it helps in writing concept notes, and monitoring programs.</li> <li>- <b>Field updates:</b></li> <li>- <b>Irbid:</b> conducted Irbid CP GBV SWG joint meeting, the main topic was presented by IRC on their activities and GBV services including male engagement. AWO announced that they will start summer club for the adolescents, several activities will be implemented including life skills.</li> <li>- <b>Zatari camp:</b> monthly meeting in Zatari with the PWG. Started to activate plan for sexual harassment in Zatari especially around schools. Activate the role of service providers in the camp. Will start with awareness sessions for parents and children. There is a need to update Amali app due to low number of users from Zatari camp. Suggestion to make it easier so that girls between the age of 12-15 can use it easily. Co-chairs asked coordinators to share the suggestions from the FGD to look at it. Zatari has been focusing on two thematic areas that are sexual harassment and child marriage for the past two years. Will start providing awareness sessions inside schools.</li> <li>- <b>Mafraq:</b> challenges in Mafraq were discussed in July's meeting. Main challenge is that few organizations attend meetings, and few numbers of organizations provide CP services. Another challenge is lack of legal representation and lawyers to represent survivors and children at the court. This concern will be referred it to the legal unit in Amman.</li> </ul>	
<p><b>IM updates</b></p>	<ul style="list-style-type: none"> <li>- <b>ActivityInfo:</b> Monitor database is still open for all months; members should report on the 1st and 2nd quarter. PLAN database will be re-opened, and members are requested to correct their discrepancies to match their appeal under 3RP. Members who don't have inputs should enter zero.</li> <li>- JFT: for financial tracking IACU reached out to the reporting focal points to provide their 2022 Q1 and Q2 budgets.</li> <li>- <b>GBV IMS updates:</b></li> <li>- Reported Activities will be implemented in 6 different Locations around Jordan.</li> </ul>	<p><b>For any inquiries related to reporting on ActivityInfo and JFT, contact <a href="mailto:mahafza@unhcr.org">mahafza@unhcr.org</a></b></p>

	<ul style="list-style-type: none"> <li>- Only 11 agencies reported under AI PLAN database and the number is low comparing to last year. Some presented numbers are not yet finalized as some agencies are still updating their info under the AI system. 9% of Total target Achieved for the first four indicators. 83% of clients demonstrating satisfaction towards GBV case management services they received.</li> <li>- No data has been entered under RES pillar.</li> <li>- Some GBV partners who appealed during the JRP 2020-2022 did not upload their data under AI system.</li> </ul>	
<p><b>Menstrual Hygiene Management paper presentation</b></p>	<ul style="list-style-type: none"> <li>- Menstrual Hygiene Management paper presentation by Takatoat, a feminist organization in Jordan.</li> <li>- In 2020 Takatoat issued research to investigate the effect of COVID-19 on girls. One of the main challenges was that most of women’s needs were not covered during COVID. Plan International Organization talked about the effect on women during crisis. In 2020, a group of students from Lazard university worked on research in Mafrag to study the challenges women face during their menstrual cycle. After all these studies, middle east countries showed that women face many challenges during this period.</li> <li>- In Jordan, a study paper was prepared, and it talked about period poverty meaning that women are not able to have the basic hygiene during their menstrual cycle.</li> <li>- Many countries consider period poverty as a priority; however, this is not applicable in Jordan due to a lack of awareness.</li> <li>- The paper will be published in AR and EN.</li> <li>- Takatoat conducted FGDs and included different groups like persons with disabilities, and different nationalities.</li> <li>- Main discussed topics were the following: Social, Economic and Health.</li> <li>- 89 participants were involved covering different age groups (15-49) including divorced, persons with disabilities, mothers, single women, etc.</li> </ul>	<p><a href="#">Takatoat presentation in Arabic</a></p>

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|  | <ul style="list-style-type: none"><li>- FGDs were conducted with the involvement of experts like doctors, people from MoH, hospital directorates, Al Basheer hospital, and private companies.</li><li>- A workshop was conducted to discuss the paper.</li><li>- <b>Results:</b></li><li>- Social impact and stigma as women feel a shame to discuss this topic. Also, schools do not discuss menstruation openly which makes it harder for girls to talk about it. It is important to give awareness to boys as well so they can understand. Some mothers stated that they feel ashamed when talking to their daughters about this topic.</li><li>- In Azraq camp, women stated that they take around 35 JDs for 3 months to buy the needed equipment for menstrual hygiene that is not enough.</li><li>- Health side: privacy is a challenge especially in public clinics. Stigma that unmarried women face when going to gynaecologists. Women with disabilities face major challenges like hysterectomy that causes dangerous side effects.</li><li>- Recommendations:</li><li>- Some of the main recommendations that are addressed to Sharia court, civil society, and international society are: to include tax exemption for menstrual hygiene equipment. More female medical staff is needed especially outside Amman. Include hormonal tests under the health security system.</li><li>- For MoSD: taking into consideration providing menstrual hygiene equipment while distributing parcels to persons in need.</li><li>- International organizations: to provide more awareness sessions and distribute menstrual hygiene equipment.</li><li>- Q: does Takatoat provide awareness sessions only?</li><li>- Yes.</li></ul> |  |
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	<ul style="list-style-type: none"> <li>- Comment: Many women do not have information about menopause, there should be more awareness sessions on this topic.</li> </ul>	
<p><b>Cash for GBV guidance consultation</b></p>	<ul style="list-style-type: none"> <li>- After a first consultation with the cash taskforce, there was an agreement on the need to both strengthen GBV mainstreaming across the general CfP SOPs as well as develop an ad hoc Annex with additional guidelines for the use of cash assistance in GBV programming. We then reached out to a group of GBV actors who are implementing cash activities with GBV survivors in Jordan, to do a brainstorming of what was needed and start gathering inputs on their procedures to integrate cash within GBV case management, and now we are providing an overview of this exercise to the SWG. The goal is to develop key guidance and a common understanding of the procedures of providing cash and voucher assistance as part of GBV case management.</li> <li>- <b>Case Management</b> is a structured method for providing help to a survivor of GBV. It involves one organization, usually a psychosocial support or social services actor, taking responsibility for making sure that survivors are informed of all the options available to them and that issues and problems facing a survivor and her/his family are identified and followed up in a coordinated way, and providing the survivor with emotional support throughout the process.</li> <li>- <b>Cash Based Assistance</b> for GBV is intended as financial assistance delivered in the framework of a case management process directly to the survivors to support them in meeting essential needs related to their case action plan. The role of cash assistance is also to support survivors to fully recover from their experiences of violence, including through accessing services and/or to mitigate GBV risks.</li> <li>- This guidance note was developed by a group of organizations with experience in GBV case management and cash and voucher assistance that are part of the Jordan GBV Sub-Working Group and the Cash for Protection Task Force.</li> <li>- Eligibility for cash assistance considers the financial barriers the survivor is facing, the GBV incident or risk and whether the cash can contribute to reduce the risk of GBV or to support the recovery of the survivor.</li> <li>- <b>Objective:</b> <ul style="list-style-type: none"> <li>• Verify receipt of and access to cash assistance by the survivor</li> <li>• Determine the appropriateness of the process, the outcomes, and effectiveness of the assistance in relation to addressing the needs of survivors.</li> <li>• Gauge satisfaction with the content, process, and results of the assistance delivered.</li> </ul> </li> </ul>	

	<ul style="list-style-type: none"> <li>- This tool should under no circumstance be administered by members of the M&amp;E team. Filled forms should be directly transferred to the GBV team for analysis.</li> <li>- <b>DOs and DON'T's:</b></li> <li>- No data on vulnerability assessment conducted by GBV actors should be shared with CVA partners.</li> <li>- All actors involved in the process of cash assistance as part of case management should be aware of their obligations to maintain confidentiality. All information sharing should be done based on the survivor's ongoing informed consent.</li> <li>- Ensure an appropriate transition strategy out of the CVA cycle.</li> <li>- Healing from violence and building a pathway for empowerment require more time and material resources than the typical six months of regular cash assistance, and it is important to direct GBV survivors with existing livelihood activities to support them in developing sustainable income-generation activities.</li> <li>- <b>Comments:</b></li> <li>- Medair services: provide cash assistance, referrals, paying bills for pregnant women for all nationalities. Pay for urgent surgeries. New project for winterization. Equipment for persons with disabilities. Sign language basic services.</li> <li>- The guidelines will be finalized by September.</li> <li>- A technical workshop will be conducted next week.</li> </ul>	
AOB	<ul style="list-style-type: none"> <li>- N/A</li> </ul>	