

Sector Gender Monitoring Dashboard
Mid-Year (1 January – 30 June 2022)



SRH sector

Objective:

This Sector Gender Monitoring Dashboard (SGMD) helps to monitor and analyze the implementation of the Syria Crisis Response interventions in Jordan through gender lenses.

Frequency: Twice a year (mid-year and end-year)

Data Sources: Sector’s reporting in Activity Info Monitor Database (reflected in the online Sector dashboard) against the selected indicators serves as the main data source for the SGMD.

It has been developed based on available data/information shared by partners on Activity Info.

GAM, Availability, Accessibility, Acceptability, and Quality, as well as Age, are used to analyze data.

We can improve gender lenses with sector yearly planning reflected in the work plan for 2023 with the dashboard information and recommendations.

1. Situation of the Sector with Gender Consideration

The SRH concerns all individuals (Women, Girls, Boys, and Men [WGBM]) throughout all life stages and concentrates on implementing the integrated, comprehensive SRH package that crosscuts with three important principles, which are equity in access, quality of care, and accountability, as these principles are fundamentally a matter of respecting protecting and fulfilling the human rights, including the health right to appropriate and responsive services, meeting gender inclusion and life cycle requirements. Therefore, gender equality and the empowerment of girls and women, and other marginalized groups will not be possible without realizing sexual and reproductive health and rights (SRHR).

1st Indicator: number of SGBV survivors who access medical care.

0 woman.

0 men

0 girl

0 boy

2nd indicator: the number of provided antenatal care visits.

18,090 women.

992 girls.

- Strengthening the capacity of 29 healthcare providers (Doctors, Nurses, midwives, and pharmacists) through conducting 2 CMR (clinical management of rape) training, including two men healthcare providers; the rest are 27 women healthcare providers.
- Awareness of WGBM from different age groups on different topics under SRH including but not limited to: Antenatal care, post-natal care, high-risk pregnancies, STIs, maternal nutrition to prevent Anemia, reproductive cancers, post-abortion care, and FP methods.

<p>3rd indicator: number of beneficiaries who received FP methods.</p> <p>7,153 beneficiaries (women + girls).</p> <p>4th indicator: number of under 5 children and WCBA identified and treated for Anemia.</p> <p>2,360 cases.</p> <p>5th indicator: number of beneficiaries reached with health awareness services.</p> <p>274,610 beneficiaries.</p> <p>6th indicator: number of deliveries in the presence of a skilled attendant.</p> <p>588 beneficiaries (women + girls).</p> <p>7th indicator: number of health-care providers trained to provide clinical management for GBV survivors.</p> <p>29 participants (men and women participants).</p>	<ul style="list-style-type: none"> - Antenatal (ANC), postnatal care (PNC), and family planning (FP) for women of reproductive age (15 – 49 years). - Providing couple counselling for both men and women. - Improving the realization of SRHR awareness and the quality of SRH services, including ensuring that rights holders’ views and demands are captured and taken into account in the provision of SRHR services to enable them to decide the number of children they want and the spacing between births. - Ensuring SRHR is a reality for all by engaging women, men, girls, and boys. - SRH health services awareness about SRHR for adolescents, youth, parents, and adults (WGBM) is provided. - Awareness about family planning services and their benefits for women and men.
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2. Gender Analysis [according to GAM and SGFPN Workplan]

This section is strategy related. What is the Sector focus, and how is gender formulated in that strategy? Analyze if the achievements of the Sector are in line with the strategy. Liaise with the Sector Coordinators to confirm the more important activities related to each category (WGBM), and check the reported achievements related to those activities.

- The indicators listed below were strategically chosen in close consultation with the SRH Sector Coordinators and based on the focus of Health response interventions to Syrian refugee needs under the refugee pillar to demonstrate how gender-lensed such interventions/activities were.
- The information/data was analyzed using the following tools:
 - Gender with Age Marker (GAM).
 - Age and Gender (AG).
 - Availability, Accessibility, Acceptability, and Quality.

<ul style="list-style-type: none"> - I recommend disaggregating all indicators (e.g., by gender, age- .etc.) in the future to be analyzed to ensure the good utilization of the submitted data and check on the progress as well, especially since most indicators such as awareness sessions are provided to WGBM, in addition, that family planning methods are provided to men in some cases, as deciding the family planning requires both partners. However, the figure is not disaggregated by gender under beneficiaries served with family planning indicators. - Few figures reported SGBV survivors accessing medical care, likely due to reporting issues. 	<p>In general, health interventions are responsive and fair – GEMs (Age, Gender, and Action) as health design the types of health services based on the needs expressed by girls, boys, men, and women in different age groups and different health, social and economic status.</p> <ul style="list-style-type: none"> - Most of the mentioned indicators above are filled as a total number without disaggregation. This means that most of the details of the indicators are not available regarding category; only two indicators are disaggregated by age group. This activity could even be the subject of a recommendation aiming to be integrated into the work plan of the sector.
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<ul style="list-style-type: none"> - Two indicators are related only to women (antenatal and delivery indicators). 	<ul style="list-style-type: none"> - Ensure the engagement of men and boys as partners in gender transformative change by ensuring that sexual and reproductive health and rights are for all. - I recommend disaggregating all indicators in the Activity -info in the future to be well analyzed.
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3. Recommendations [according to GAM and SGFPN Workplan]

- Provide recommendations on how to address the gender gaps as per the objectives of the GAM and the SGFPN Workplan.
- Identify key principles that need to be re-emphasized and better reflected in the Sector’s reporting
- Identify key activities to help close the gender gap among the different categories (WGBM).
- Give recommendations on the areas the Sector needs to focus on to fulfil the gender requirements for each relevant category (WGBM).
- Left column is for Sector, and the right column is for GAM and SGFPN Workplan.

<p>Under all figures and indicators, it is important to segregate each per sex and age to ensure equal services, except for the ANC and delivery indicators.</p> <p>The plan is to inform SRH SWG members in charge of reporting these indicators to report disaggregated data quarterly to share reporting on the implemented activities, including service utilization.</p>	
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4. Other Relevant Topics

- Highlight other relevant topics/subjects of concern.

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