

**Meeting Minutes 28<sup>th</sup> of August 2019**  
**UNHCR BO Amman, Jordan – EMOPS Room**

**Agencies present: 20 agencies.**

**Agenda**

- 1. Coordination update including IM**
- 2. JRP- Next response plan process update**
- 3. GBV and SRH service assessment in the South of Jordan**
- 4. Presentation of research on sexual violence against men and boys**
- 5. Good practice presentation: GBV mobile service delivery (IRC)**
- 6. AOB**



<b>Agenda items</b>	<b>Discussion</b>	<b>Action points</b>
<b>Coordination update including IM: Chair-UNFPA</b>	<ul style="list-style-type: none"><li>- Gap analysis started this year with more light process as the plan was to take the one from last year and work on it. Camp completed their part with gap analysis, however Amman and the South need to complete their part and the work needs to be done by September 2019.</li><li>- OCHA registration: OCHA sent an email to organizations and clear guidance on how to register. OCHA will conduct capacity</li></ul>	Coordinators to circulate after the meeting OCHA emails. Partners to contact OCHA

	<p>assessment to the organizations to access Humanitarian Funding. This is only for organizations not previously registered</p> <ul style="list-style-type: none"> <li>- <b>AMALI</b> application: yesterday (26th of August) fourth and last debriefing took place with 25 participants . The launch for the application will be in September and many organizations and refugees will be invited to celebrate.</li> <li>- GBV Risk Mitigation Interventions in Humanitarian Action training took place in July with the support of global UNFPA GBV in Emergencies Specialist. 29 participants from different sectors working in different organizations and people from some ministries attended the training. The training was not for GBV providers but for other humanitarian workers. After the training, an action plan for each sector was prepared in order to be discussed with sector leads and to be presented in monthly meeting. Regarding protection sector, one of the main points discussed in the action plan was the need for safe referrals training. By the end of September, the action plan should be discussed, and implementation should start.</li> <li>- Task Force on GBV disability guidance met yesterday and it was agreed on the content and guidance. Several things were taken into consideration like dealing with different types of disability in Jordan. Technical support from Handicap International and other organizations was provided.</li> <li>- At the global level GBV AoR has revised and updated the Handbook for Coordinating GBV in Emergencies (GBViE). A training for GBV Coordinators (leads and co-leads) at the national as well as sub-national level as well as staff from national NGO with an interest in coordination will take place in September 2019. Local</li> </ul>	<p>AMALI launch for the application will take place in September 2019. Coordinators will send invitation</p> <p>The plans will be shared as finalized in October with the SGBV WG</p>
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<p><b>JRP-Next response plan process update/Co-chair -UNHCR</b></p>	<p>NGOs were encouraged to submit their names in order to receive the training.</p> <p>The GoJ held a preliminary workshop to propose the new JRP plan for 2020-2022. The proposal included several changes starting with the new name for JRP that is “Jordan Resilience and Protection Plan for Syria”. Other changes were discussed as well like the structure of sectors as the suggestion was to have 6 sectors instead of 12, for example protection will cover resilience needs and many other things. Moreover, it was mentioned that protection markers will be integrated in the plan.</p> <p>Partners and relevant stakeholders were requested to provide their feedback and comments to MoPIC and approved changes will be shared.</p>	<p>A training for GBV Coordinators (leads and co-leads) will take place in September 2019.</p>
<p><b>GBV and SRH service assessment in the South of Jordan/ Try centre for training and education in collaboration with University of Ottawa.</b></p>	<p>UNFPA consultant presented findings from a needs assessment and mapping exercise of sexual and reproductive health (SRH) and gender-based violence (GBV) services in the South of Jordan. Project objectives included:</p> <ul style="list-style-type: none"> <li>- Map the availability of SRH and GBV services in Aqaba, Karak, Ma’an, and Tafileh.</li> <li>- Assess whether the existing services address the needs of beneficiaries as well as beneficiaries’ satisfaction with these services.</li> <li>- Provide recommendations on service gaps in terms of availability, quality, accessibility, and affordability.</li> <li>-</li> </ul> <p>Methods used included desk review of documents in both English and Arabic, Individual and small group interviews, Focus group discussions and a Validation workshop in Karak.</p> <p>Findings within GBV context were:</p>	<p>UNFPA will share the report once finalized in September</p>

	<ul style="list-style-type: none"> <li>- Early marriage, physical violence, and inheritance deprivation are the main forms of violence expressed by Jordanian women and girls in the South.</li> <li>- GBV services are concentrated in Karak then Aqaba; fewer services are available in Ma'an and Tafileh.</li> <li>- The GBV pathway and referral system for Syrian refugees is working well.</li> <li>- For Jordanians, case management is more complicated.</li> <li>- Organizations have serious concerns about involving the FPD.</li> <li>- Women do not feel the MoSD shelters are safe spaces.</li> <li>- Local organizations that refer women and adolescents do not receive much feedback which undermines trust.</li> <li>- GBV and SRH services are siloed.</li> <li>- With the exception of the IFH clinic in Karak, there are no providers of CMR services.</li> <li>- Geographic distance is a major barrier for women and girls seeking services.</li> <li>- The GBV pathway for Syrians is more survivor-centred than the services and protocols for Jordanian women, which are more focused on family reunification.</li> </ul> <p>Recommendations included better referral pathways, better feedback loops for local CBOs, support better integration of services between GBV and SRH and support more mobile or "hoteling" services.</p>	
<p><b>Presentation of research on sexual violence against men and boys /</b></p>	<p>Eric a researcher from SOAS University of London presented about Conflict-Related Sexual Violence Against Syrian Men and Humanitarian Responses in Jordan: Research, Prevalence, and Considerations.</p> <p>Research objective and methods: How do humanitarian organizations recognize and respond to Syrian male survivors of conflict-related sexual violence in Jordan. There are three ways that males are presented in humanitarian discussions: male perpetrator, strategic ally for women and "elusive" male victim.</p>	

	<p>Psychosocial Impacts like shame, guilt, anxiety, questions of Sexual and Gender Identity and other SGBV damages like reproductive health were mentioned. SGBV does not only happen in detentions as it can be during home raids, checkpoints, Camps and Urban, etc.</p> <p>Findings were disclosure and listening, minimal medical inquiry into men's experience, perspectives on SGBV response services and future implications.</p> <p>Mental Health Practitioner Exposure: differences in knowledge of SGBV against men amongst front-line staff and managers. Not all staff are comfortable talking about or providing care for men.</p> <p>Medical Services Miss Signs of SGBV. Perspectives on SGBV response services for Men Influence Direction of Care.</p> <p>Existing Programs for Males Survivors of SGBV in Jordan: Sexual health classes and medical checks for men, helpline with male and female phone case managers, men's workshops on pain, memory, loss, etc, legal services to document experiences and male physiotherapists for torture survivors.</p> <p>Five Recommendations to improve for Survivor-Centered Care:</p> <ol style="list-style-type: none"><li>1. Program design.</li><li>2. Discussion.</li><li>3. Reflect.</li><li>4. Outreach.</li><li>5. Engagement.</li></ol>	
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<p><b>Good practice presentation: GBV mobile service delivery (IRC)</b></p>	<p>IRC presented a good practice on mobile GBV service delivery. Mobile response will be implemented to cover the camp when normal services are unreachable. The main focus is on women and girls. Five key elements to be considered: 1. Overview of mobile and remote GBV services. 2. Setting up mobile and remote GBV services. 3. Applying the minimum standards. 4. Providing case management. 5. Supervision and monitoring.</p> <p>There was coordination with partners, organizations, CBOs on building key relationships with community groups and institutions.</p>	<p><b>More information on GBV mobile service approach Can be found here</b>  <a href="https://reliefweb.int/sites/reliefweb.int/files/resources/GBV-Mobile-and-Remote-Service-Delivery-Guidelines-final.pdf">https://reliefweb.int/sites/reliefweb.int/files/resources/GBV-Mobile-and-Remote-Service-Delivery-Guidelines-final.pdf</a></p>
<p><b>AOB</b></p>	<p>Joint SWG between CP and SGBV will take place on 17 September 2019. Only one participant from each organization. Agenda to be shared.</p> <p>17 September 2019: SGBV safe referral training for non-specialized GBV workers, organized by Jordan River Foundation.</p> <p>Coordinators will send out a SurveyMonkey link for performance appraisal of the SGBV WG with around 10 questions to be filled by participants.</p>	

**Next Meeting: 17<sup>th</sup> of September 2019**