Terms of Reference :Reproductive health sub working group Jordan-2014

Background:

The group initially established in 2009, in response to the presence of Iraqi refugees in Jordan, under the leadership of UNFPA the reproductive health sub-working group(RH SWG) reactivated in response to Syrian crisis and as one of the functional groups under the health sector. The RH SWG plays a major role with other sub-working groups (SWG) and task forces (TF) such as the S-GBV, nutrition, mental health, psychosocial support SWGs and youth task force; and also works with other relevant working groups such as the Non-Food Items (NFI); with the purpose of coordinating a comprehensive response to crisis demands.

The main mission of the RH SWG is to ensure that reproductive health needs of women, girls, boys and men are identified and that accessible and quality services are established to respond to these needs.

MOH plays a major role in providing quality health care service including RH and family planning for people in Jordan including the Iraqi and Syrian refugees, through its health facilities that exist in all the governorates. MOH has contributed significantly in tangible achievements in the health care resulting in positive health indicators (e.g. decrease in infant and maternal mortality ration). MOH worked on developing national RH protocols and takes the leading role in capacity development interventions for other concerned stakeholders in Jordan on RH issues.

The group is working toward serving Syrian refugees and host communities in order to scale up the capacity for long term responses and resilience of the community.

Background statistics:

As of the end of April 2015, statistics shows that approximately 628,427 registered Syrian refugees are currently present in Jordan,20% are in camps. Syrians are highly concentrated in four cities: Mafrag, Amman, Irbid

and Zarka respectively. Between 70% and 75% of those refugees are women and children with the assumption that around 25% of the affected population are women of reproductive age.

Purposes of RHSWG

- To ensure that reproductive health issues of the target populations are brought forward in the humanitarian response agenda in Jordan and that needs and service gaps are identified and responded to through a strategic and comprehensive approach.
- To support intervention aiming to raise community awareness of the available reproductive health services and to work in coordination with other relevant sectors and sub-sector working groups to ensure consistency of actions.

The RHSWG will

- Work to identify needs and services gaps;
- To follow on the national rules and regulations for training
- follow up on the implementation of sustainable solutions; and
- Develop RH strategies for the humanitarian response including priority interventions.

Membership, meetings frequency and attendance:

Core members of RH WG are:

- 1. UNFPA Reproductive Health officer as a chair for the meetings and coordinator of the SWG;
- 2. Representatives from NGOs, UN agencies and other humanitarian organizations providing RH services or implementing RH programs;
- 3. Representative from MoH and possibly other relevant national institutions.

Meetings are conducted on monthly basis (or more frequently if the need arises) and all members are encouraged to attend all meetings. If unable to attend, they may submit written comments or send a substitute, as well as sending comments via email.

Other persons may be invited to the meetings, including technical experts and donor representatives, when appropriate to the agenda of the meeting or as needs emerge.

A focal point from each agency providing reproductive health services is assigned, the focal point will be responsible on regular attendance to represent his agency and ensure propoer coordination with actors, during the year only three times absence for the focal point is allowed, but in such a case the alternative focal point should attend the meeting.

Objectives of the RHSWG:

The group specific objectives are:

- 1. To promote coordination and collaboration among implementing agencies and relevant RH stakeholders, including MoH, NGOs (local and international), and the affected populations;
- 2. To ensure that well established coordination mechanisms for implementing RH services are in place.
- 3. To liaise with other interagency working and sub-working groups, to avoid duplication of the information generated and the integration of RH interventions and services(refer to Jordan refugees coordination structure):
- 4. To prioritize the health needs and services required and review the allocation of available health services against these priorities;
- 5. To promote the application of the appropriate international / national standards in planning RH programs and providing services;
- 6. To ensure implementation of the Minimum Initial Service Package (MISP) and Clinical Management of Rape (CMR) standards among all reproductive health care providers and ease transition to comprehensive reproductive health services;
- 7. To put in place measures to protect affected populations, particularly women and girls, from sexual violence in the services implemented by humanitarian agencies and National Health Service providers;
- 8. To strengthen the monitoring and evaluation procedure to ensure quality RH services

- 9. To ensure an effective intersectoral referral system is in place through proper linkage and communication between the community, and the health center and hospital or among partners to facilitate better comprehensive response; and
- 10. To advocate for RH to policy and decision makers and relevant partners.

Decision making:

Consensus will be the basis of decision making for the group. However, incase the group cannot reach a 100% consensus; the majority opinion will be followed.

Reporting Line:

The RH SWG Coordinator reports to the health working group lead through monthly meetings, emails, written comments or any other means agreed. Reporting may include: Needs, services established, capacity building activities and achievements.

Za'atri/Azraq RHSWG:

Za'atri and Azraq RH SWG is part of the general RH SWG and reporting directly to it and to the health coordination group in Za'atri and in Azraq, similar objectives apply to the two groups but the purposes of establishing this group are:

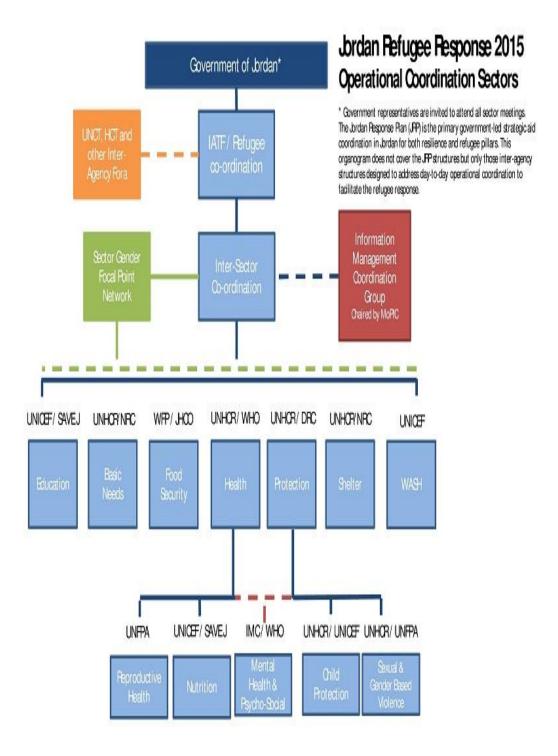
- 1. To strengthen the RH response on the field level especially in Za`tari and Azraq.
- 2. To ensure a continuum of coordination within and among the various levels of providing RH services;
- 3. To ensure representation of all RH partners;
- 4. To highlight areas of concern relevant to RH and identify proper solutions in coordination with SWG; and
- 5. To follow up on the quality and performance improvement on field level relevant to RH.

Tools to be used by the RHSWG:

- 1. RH mapping
- 2. RH action plan
- 3. Quality checklists
- 4. IEC materials
- 5. Reproductive health core messages Reproductive health surveillance system
- 6. Reproductive health supervisory checklists

References:

- 1. MoH / Jordan health policies, procedures, protocols and clinical guidelines
- 2. Interagency field manual on reproductive health in humanitarian settings, 2010
- 3. MISP checklists and MISP assessments
- 4. Resilience refugees response plan(3RP)/2015Child Protection and gender-based violence Standards Operating Procedures (SOPs)
- 5. Reproductive health supervisory checklists ,2014
- 6. Minimum Initial Service Package (MISP) for Reproductive Health in Crisis Situations
- 7. Refocusing Family Planning in Refugee Settings: Findings and Recommendations from a multi-Country Baseline Study, November 2011UNFPA Operational Guidance for Comprehensive Sexuality Education: A Focus on Human Rights and Gender, 2014
- 8. IPPF, UNFPA, WHO, The Interagency Working Group on SRH and HIV Linkages SRH and HIV Linkages Compendium: Indicators and Related Assessment Tools :: http://www.unfpa.org/publications/srh-and-hiv-linkages-compendium-indicators-and-related-assessment-tools#sthash.wWHqINY4.dpuf, 2014



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