Zaatari Health Information System

Summary Report

Third Quarter 2022

I. Introduction

Health information system (HIS) has been implemented in Zaatari camp since the end of 2012. The report for the third quarter of 2022 covers the period 02 July to 30 September 2022 (Week 27 – Week 39). It includes data from all health facilities in Zaatari camp reporting on HIS on weekly basis including six clinics, one emergency room and one maternity center. This includes IMC emergency room, IMC Comprehensive Clinic, IMC Mental Health Clinic, Qatari Clinic, Saudi Clinic, IRC Clinic, SAMS Clinic, and JHAS Maternity Center. The population figure used for calculating indicators is the median for the reporting period; 82,129.

II. Mortality

During the third quarter of 2022, 24 mortalities were reported from Zaatari camp with a Crude Mortality Rate (CMR) of (0.1/1,000 population/month; 1.2/1,000 population/year). This is slightly lower than the first quarter. Nevertheless, the rate is lower compared to the reported CMR in Jordan in 2021 according to the Department of Statistics (0.50/1,000 population/month; 6.0/1,000 population/year)[1].

Among the 24 deaths, 8 (33%) were in children under 5, of which 5 were neonatal with a neonatal mortality rate (NNMR) of 9.2/1,000 livebirths. This is comparable to the first half of 2022 (8.4/1,000 livebirths).

Cardiovascular diseases, neonatal deaths, and COVID-19 deaths were the top causes of mortality with proportional mortalities of 33%, 25% and 8% respectively.

Mortalities reported on HIS are obtained from Zaatari Camp Central Death Registry which includes deaths that took place inside the camp and deaths at referral health facilities outside the camp. Nevertheless, the system does not capture death cases that occur out of the camp who have not followed the usual referral pathways.

III. Morbidity

The health facilities in Zaatari camp with outpatient department (OPD) activities operated on average 4.9 days per week. On each day the health facilities were functioning, there were approximately 29.3 full time clinicians covering the OPD with a rate of 41 consultations per clinician per day and is within the acceptable standard (<50 consultations per clinician per day). The rate is higher compared to the first quarter and second quarters of 2022 (39 and 38 consultations per clinician per day respectively).

[1] Jordan Statistical Yearbook 2021 – Department of Statistics

1. **Acute health conditions**
   Twenty-four alerts were investigated during the reporting period for diseases of outbreak potential including watery diarrhea, bloody diarrhea, acute flaccid paralysis, acute jaundice syndrome, suspected measles and suspected meningitis. In addition, trends of COVID-19 cases in the camp were continuously monitored.
   Upper respiratory tract infections (URTI), urinary tract infections (UTI), and dental conditions were the main reasons to seek medical care for an acute health condition with proportional morbidities of 32%, 9% and 8% respectively.

2. **Chronic health conditions**
   Hypertension, diabetes and musculoskeletal disorders were the main reasons to seek medical care for a chronic health condition with proportional morbidities of 21%, 19% and 12% respectively.

3. **Mental health conditions**
   Mental health consultations accounted for 2.7% of total OPD consultations. Moderate-severe emotional disorders and epilepsy/seizures were the two main reasons to seek mental health care during the reporting period.

4. **Injuries**
   Consultations for injuries accounted for approximately 3.7% of total OPD consultations.

IV. Inpatient Department Activities (In-Camp)

Inpatient department activities are conducted by JHAS/UNFPA maternity center in Zaatari camp. 656 new inpatient admissions were reported with a bed occupancy rate of 95% and a hospitalization rate of (2.7/1,000 population/month; 31.9/1,000 population/year). All admissions were obstetric admissions.

V. Referrals (Out-of-Camp)

Total referrals to hospitals outside the camp were 2,947 with a referral rate of 12/1,000 population/month. Referrals for children under 5 and obstetric referrals accounted for 11.7% and 19.5% of total referrals respectively. 53.7% of referrals were to private-affiliated hospitals.

VI. Reproductive Health

1. **Antenatal care**
   1,410 pregnant women were reported to have made their first antenatal care (ANC) visit, of which only 58% of those were reported to have made the visit during the first trimester. The number of reported first ANC visits during the third quarter of 2022 is higher than the number of deliveries during the same period and can be attributed to women accessing antenatal care in multiple locations and thus being reported more than once.

2. **Delivery care**
   Reported coverage of complete antenatal care at time of delivery (4 or more ANC visits, tetanus vaccination and anemia screening) is 100% and is above the acceptable standard of ≥90% for the three coverage indicators.

   655 live births were reported with a crude birth rate of 2.7/1,000 population/month. 32% of all deliveries were performed by caesarian section.

3. **Postnatal care**
   Postnatal care (PNC) coverage during the reporting period is 77%. PNC coverage is more reflective as a bi-annual and annual figure.