

Health Sector Coordination Meeting

Date: Thursday, 31 th Jul	y 2022	Venue: MS-Teams Virtual [UNHCR]	Time: From 10:00 to 12:00
Attendance: UNHCR, WHO, Appeal, UNFPA, ,SAMS, ,JH			ave the Children, , Islamic Releif Jordan, , Health
Agenda			
Review of Action Points	from the previ	ous meeting	
2. WHO/MOH update on co	ovid-19 and m	ulticountry outbreak monkey pox	
3. UNHCR Humanitarian up	odate		
4. Sub Working Groups upo	dates		
5. Partners updates Urban.			
6. AOB			
1. Review of Action Points fro	om the previou	us meeting	
Sector Chair [UNHCR]		nad Fawad from UNHCR / onbehlaf of the Heal the agenda of the meeting .	th Sector Chair welcomed the audience and
	Progress o	n action points from last month meeting:	
	• No p	ending action points	

2. WHO/MOH update on covid-19 and multicountry outbreak monkey pox

WHO

Dr Nazeema Muthu fromWHO provided an update on:

- 1- Multi-country monkeypox outbreak: description and situation updates
- 2- Global/Regional Epidemiological updates on COVID-19: (As of 30th July 2022):

1. Monkeypox

WHO has announced multicounty outbreak of Monkey pox as Public Health Emergency of International Concern

- a. Monkey pox is caused by a member of Orthopoxvirus genus in the family Poxviridae.
- b. Monkeypox is a zoonotic diseases, primarily occurs in tropical rainforests of west and central Africa and is exported to other regions.
- c. It is tranmissted to humans through close contact with an infected person or animal, or with materials contaminated with the virus(such as when they come in close contact with lesions, body fluids, respiratory droplets, and contaminated materials such as beddings)
- d. incubation period (from infection to onset of symptoms) is 6-13 days; symptoms include rash, fever, swollen lymph nodes and may lead to a range of medical complications, including other bacterial infections expected. symptoms last for 2-4 weeks; fatality ratio is 3-6 % (but historically 0-11)
- e. Monkeypox severity is less than smallpox, so mass vaccination not required
- f. WHO has formed new emergency team for monkeypox and International Health Regulation has assessed the situation as medium with no declaration as Public Health Emergency of International Concern yet.
- g. Confirmed monkey pox cases increases from 3040 in 47 countries during the week of 22 June 2022 to 16,000 in 75 countries with 5 deaths as of 24 July 2022.
- h. In EMR: UAE (13 cases), Lebanon (1) and Morocco (1); Jordan has no case so far
- i. As only very few cases are reported in the region, not much surveillance systems being initiated. No cases reported in Jordan

Interim guidance from WHO on Monkey Pox:

- Mass vaccination is not required nor recommended for monkeypox at this time.
- For contacts of cases, post-exposure prophylaxis (PEP) is recommended with an appropriate second- or third-generation vaccine, ideally within four days of first exposure to prevent onset of disease.
- Pre-exposure prophylaxis (PrEP) is recommended for health workers at risk, laboratory personnel working with orthopoxviruses, clinical laboratory staff performing diagnostic testing for monkeypox, and others who may be at risk as per national policy.
- Vaccination programmes must be backed by thorough surveillance and contact-tracing, and accompanied by a strong information campaign, robust pharmacovigilance, ideally in the context of collaborative vaccine effectiveness studies with standardized protocols and data collection tools.
- Decisions on use of smallpox or monkeypox vaccines should be based on a full assessment of risks and benefits on a case-by-case basis.

2. COVID-19

- As of 29 July 2022, the cumulative number of confirmed cases reported at global level were: 572million with over 6.3 Million deaths. The number of weekly cases reported during the week of 18 to 24 July 2022 was similar to the number of last week, with over 6.6 million new cases. Likewise, the number of new weekly deaths was similar to the number of the previous week, with over 12 600 fatalities.
- 22.5 million confirmed cases in EMR, with 344, 809 deaths, with cumulative case fatality rate of 1.5%.
- Iran holds the highest number of cumulative cases followed by Iraq and, Lebanon, Tunisia,
- the active cases are more in Somalia 46% and Sudan 27%, higher number of deaths reported in Yemen around 18.4%

In Eastrern Mediterranean Region:

- 74,000 new weekly cases were reported representing 47% increase in cases compared to previous week. Number of new deaths in the region has increased by 22% when compared to the previous week, Islamic Republic of Iran reporting highest number of new deaths.
- Newly confirmed cases of 4, 763, the cumulative confirmed cases are 1.7 Million.
- 4 new deaths have been reported, holding for total dealths of 14.000
- Case fatality rate has dropped down to 0.8%
- 52 infected persons were hospitalized,

Vaccination:

4.8M received vaccines of first dose, total vaccinated 4.5M with a vaccination coverage of 45%.

Jordan:

- Jordan recorded no cases with 881 new cases as of 24 June 2022.
- Positivity rate are on slight increase (6.7% from 5.5%),
- number of tests per week is between 10K and 15K. hospitalization is low.
- in Jordan 44% of total population have been vaccinated with two doses.

3. UNHCR update on the COVID-19 Vaccination at Both Camps (Zaatari & Azraq)

UNHCR Updates [Camps]

Dr. Mohammad Fawad from UNHCR provided an update as of, 30th of July 2022 on Covid-19 situation and the vaccination status in the refugee camps (Zataari and Azraq and EJC):

- Declining trend in COVID-19 cases has continued in the refugee camps for the last 15 epidemiological weeks after the surge in the number of cases starting in January 2022 and causing the 4th wave in the country.
- No active cases were reported in the last epidemiological week in refugee camps.
- UNHCR continues to advocate for a policy change aiming at improving access of refugees to essential health services.
- UNHCR jointly with MoH developed a new detailed health care access policy manual in December 2021 that includes guiding principles for health care providers and frontline admin staff in order

to achieve a better understanding among them on eligibilities and entitlements of refugees in terms of their access to health services. Implementation of this manual is expected to address the barriers to essential health services, improve utilization rate, and thus connect refugees to the public health care system

5. Sub-Sector Working Groups: Reproductive Health (UNFPA), Mental Health (IMC/WHO), Nutrition (Save the Children Jordan/UNICEF) and Community Health Platform (MEDAIR)

UNFPA/SRHWG

UNFPA Update:

Ali Gharabli from UNFPA provided an update on the SRH-WG:

- The SRH SWG meeting took place on July 2th
- Integrating climate change with sexual and reproductive health to safeguard the well-being of all
 was presented with a focus on the correlation with barriers to access to SRH services. These
 barriers are particularly high for girls and women, people of underrepresented and those who
 experience multiple and intersecting forms of discrimination and oppression, such as refugees.
 Gender equality, sexual and reproductive health and rights (SRHR), and climate change issues are
 inextricably linked. Climate change risks increasing social, including gender, inequalities.
- Maternity Foundation, an NGO that aims to prevent Maternal and newborn mortality and disability using digital solutions, announced its pilot project of introducing The Safe Delivery App. This App is a smartphone application that provides skilled birth attendants with direct and instant access to evidence-based and up-to-date clinical guidelines, supporting their everyday work. The App provides life-saving information and guidance through easy-to-understand animated instruction videos, action cards, and drug lists. Midwives and healthcare workers can use it on the job, in their spare time, or as part of their training.
- Zaatari Maternity Clinic will pilot the project in March 2023.

MHPSS SWG/IMC

IMC

Dr. Ahmad Bawaneh from IMC, provided an update on the MHPSS working group:

- National Public Health policy: Access levels remain as follows
 - o **Camps**: refugees can access the MOH facilities at the foreigner rate only.
 - Urban: refugees in urban can access the MOH facilities at a noninsured Jordanian rate: Syrians have to show up with valid ASC & MOI, while for non-Syrians have valid ASC. However, a waiver granted expired ASC until June 2022.
 - o Increase the number of improperly bailed out seeking NGO support as they have no access at the noninsured rate
- Among refuges, Still, the highest age group is **adults 18-59** followed 5-17 years old, **51% Male and %49 Female**
- Majority of MH services seekers in Urban: 77% Syrians, 9% Jordanian,15% others(Iraqi 6%, Sudanese 4%, Yamani 3%, Other 2%)
- MH referral breakdown:71% (Local actors, I/NGO, CBO), 15% Child Protection department, 14% MOH.
- Although the epidemiological status is stable and all precautionary measures are lifted, we have **Demand increasing** for MHPSS Services more 16% in entire locations comparing 2021 due to the **high number of referrals** and **gap in services provision** (Amman, Mafraq, and Irbid)
- The highest accumulative number of new and accumulative cases of Depression and Anxiety
- Serious MH concerns like self-harm and threatening suicide were reported among refugees and the host population. So this is one of the main topics of the Za'atari MHPSS working group to respond to and address alarming concerns to improve literacy in MH (Suicide Prevention and Interventions).
- Most common reported barriers to accessing MOH facilities:
- o The user fee approach cannot carry on even the subsidies rate
- Physical/mobility limitation (so a home-Visit approach is needed)
- Transportation Cost (remote areas)

	 Provision of a comprehensive package of specialized MHPSS services, including both some
	pharmacological and nonpharmacological interventions
	There is an MHPSS conference coming up and will be on the 25 and 26 of August
	The next meeting is planned on the third week of August 2022
UNICEF/ Nutrition Working Group	
	NA NA
NCD-Sub WG	
	NA NA
Medair/CHPF	
	Amira Amin provided an updae on behalf of CHPF and Medair
	CHPF:
	The CHPF meeting was held on Tuesday 7th of June 2022,
	Eng. Amani from MOH was shared the latest activities for the Directorate of Health Awareness
	and Media and focused on the smoking risks awareness campaign
	• In collaboration with IRC, MOH launched campaign named by "خلي عيلتك بأمان وابعد عنهم الدخان "to raise the awareness about tobacco risks on maternal and child health
	CHPF members voted to select the Co-chair, I'm thrilled to announce tat RHAS is the new co-chair.
	for CHPF
	 The latest update from all partners about the community health activities was shared
	Medair:
	Continue working on the same activities for cash for health project in Amman, Irbid, Mafraq
	,Zarqa , Balqa'a ,Madaba, Jerash and Ajloun.
	 Medair received a 1.250.000 Euro top-up for the C4H project from ECHO for a 1-year duration ,
	will continue with the same activities, in addition to covering transportation for the BNFs, and providing ANC/PNC incentives.
	 Last month, Medair conducted a refresher training for all CHVs.
	 Starting from the 1st of June, in coordination with UNHCR and JRC, Medair cover the HD sessions for 51 HD BNFs under the PRM grant and will continue with this activity until the end of August

	In June , in collaboration with CDE , Medair covered the cost of treatment for 4 BNFs for advanced cardiovascular surgeries.
6. Partners updates urban	
Partners updates [Urban]	
Caritas	Caritas has continued to provide PHC services to registered refugees where during June 10.999 primary health care consultations
	 Caritas has provided and NCD medications dispensed for 3 months stock for stable patients and monthly for unstable patients
	 2,613 patients have dispensed their medications. SGFPN
	 For the sector gender network meeting the upcoming meeting is coming soon, no update for now.
SAMS	Medical mission:
SAIVIS	 SAMS implemented the international medical mission on Jun.2022 the Medical team conducted a total of 249 surgeries in Cardiology, Ophthalmology, Dental, and General surgery specialties, nationalities of beneficiaries are Jordanian, Syrian, Sudanese and Egyptian. The surgeries were located in two main hospitals; Istishari Hospital and Meddle East Eye Hospital. In collaboration with local societies and MOSD in Jordan, the medical team reached more than 1800 patients with Secondary consultations and dental Interventions. The medical team consists of the following specialties; Cardiology, Dental, Dermatology, Internal Medicine, Pulmonology, Radiology, Gastroenterology, Rheumatology and Nephrology. The Mission team conducted one training in "Heart failure from the perspective of a nephrologist, early arthritis" attended by 6 doctors from MOH health medical teams from different hospitals and 14 doctors from SAMS volunteers. The Peer-to-Peer support targeted 7 doctors " 2 Dentists,

- 2 ophthalmologists, 2 general surgeons, one Anesthetist to join the surgeons in the Istishari Hospital and Middle east eye hospital.
- SAMS conducted awareness sessions about healthy life style to promote best the healthy life style daily practices among the host community in Jordan and the refugees in collaboration with the Jordan Ministry of Health, the seasons reached 90 beneficiaries.
- SAMS is planning for next mission where it will be in second week of Oct.2022, types of surgeries will be Cardiology, neuro surgery, ENT surgery and dental surgery for pediatric.

SAMS rehab clinic in Wadi Al Seer comprehensive center:

• SAMS rehab clinic in Wadi Al Seer comprehensive center is providing rehabilitation consultation services and physiotherapy services as well as providing assistive devices, the clinic is providing rehabilitation consultation 3 days per week (Sunday, Tuesday, Thursday) the physical therapy session is provided 6 days per week from Saturday to Thursday.

SAMS medical center in Zaatari camp:

• the clinic is operated 5 days per week from Sunday to Thursday, providing dental services (4 days per week, Sunday, Monday, Wednesday and Thursday), radiology (x-ray) and vaccination services. The medical center is also conducted oral hygiene orientation session for the clinic beneficiaries.

MHPSS:

- SAMS is continuing in providing MHPSS services in Amman and Irbid through: Field visits, including assessment of medical, psychological and social needs,
- Awareness workshops on gender-based violence, Individual psychological support sessions,
 Pharmacotherapy sessions for cases that need medication and Individual sessions for cases of gender-based violence.
- Addition to trainings (Safeguarding training and mental health training for CBOs).

Ms. Baraa provided an update on behalf of HI:

HI Update:

- The rehabilitation team provided several technical training session for HI partners health staff
- Accessibility work was conducted in princess Basma Hospital in Irbid, CDC Wehdat and ALQwesmeh PHC.

ΗΙ

	 Rehabilitation platform was conducted in presence of many members to enhance the implementation of national rehabilitation strategy The referral process is ongoing for our beneficiaries that include CBR team identified the beneficiaries and then refer them to our partner to receive the appropriate rehabilitation and early intervention including physiotherapy, occupational therapy assistive devices needed, and P&O. In addition, to the children a speech therapy and early detection for the developmental delay. Early childhood Development(ECD) ECD established 5 centers in collaboration with MoDS in 3 governorates in Irbid, Zarqaa and Amman ECD currently work with 28 health centers in three governorates providing support for the health staff working with maternity and childhood HI continued with MoH implementation of the DDH and CP guidelines.
Islamic Relief Jordan CDE	 Ms. Dania provided brief on IRJ activities: Islamic Relief Jordan Monthly report has been shared with focal point at MoH . NA
HoM HumaniTerra – Jordan	 NA NA NA
RAHS Qatari Red Crescent(QRC) Health Apeal Society	• NA • NA

AMR	 Dr. Basheer provided an update on behalf of AMR: AMR has started in the second trimester of this year 2022 preparing to introduce health education services for NCD patients who have attended the health center in Azraq camp, mainly V6 and V3. AMR recruits a health educator responsible for reviewing NCD patients' files to indicate their target people by separating control from non-controlled patients to give them intensive sessions and health massages to change their healthy lifestyle that may lead to controlling their disease and make them feeling better. 40% of registered NCD patients in V3 and V6 were found non-controlled. The AMR NCD team reviewed WHO and MOH Jordan NCD guidelines and adopted them as references to their health sessions and massages The AMR NCD team prepared a work plan to cover their target by the end of this year. The AMR NCD team started to implement their work plan and observed that there was a good interactive discussion during the session provided. Evaluation Program will be at the end of this year. To make NCD easier and more available for those who need it, AMR in cooperation with UNHCR transfer provides NCD services for patients of V2 to be at V2 Al shaikh Jasem HC. since April/2022 instead of providing it at V3 as before.
ICRC	• NA
EMPHNET	• NA
IOCC	 The International Orthodox Christian Charities (IOCC) in partnership with the Institute of Family Health (IFH) and as a gift from the US government (PRM) is finalizing the first year of its two year project "Access, Inclusion, & Empowerment: Support for Refugees and Host Community Members with Impairments & Disabilities in Jordan" after opening a new clinic in the South Jordan/ Karak, as a new location to provide services for people with disabilities (PWDs) along with the other four locations: Sweileh, Russeifa, Zarqa, and Irbid. Services provided include rehabilitation sessions (Occupational Therapy, Physical Therapy, Speech Therapy, and Special Education Therapy), vision clinic, hearing clinic, provision of eyeglasses/ hearing aids/ low vision devices, ENT and Ophthalmologists consultations/ treatment, eye and ears surgeries for the most urgent cases, and PSS sessions for PWDs and their caregivers.

	IOCC accepts referrals for new cases on the following email: LKhalaf@iocc.org.
сут	• NA
IRC	 IRC continues to serve a Cohort of 850 NCD patients in North Jordan Governorates through Cash for Health, and IRC will sustain the programming with more modes of delivery for the next 2 Years.
	 IRC secured funds for the Zaatari health clinic in District 5 till December 2023 – the objective is to sustain the primary health care services, including the SRH, PHC, and management of NCDs; the clinic will serve the population in District 5 & 6 and reach half population of the camp with at least one service.
	 IRC strengthened the SRH services in Azraq with Tetanus vaccines and the Implanon family planning method for the first time in the camp – Dr. Muhammed Fawad and Ali from UNFPA already delved into the technical aspect of the enhanced services.
	Ibrahemm from UNHCR addressed aquestion on the monitoring mechnaism of CASH for health interventions.

7. AOB	
АОВ	 Samira (UNHCR) provided an update on: ActivityInfo - due date for third extension; urgent call to upload data by today ActivityInfo data is critical for information-sharing Service Advisor – tells us who is doing what, what wheren and to who
Action Points	

Next Monthly Meeting On 25 th of August 2022 From 10:00 to 12:00
