

Health Sector Working Group August 2023

Minutes of Meeting

Date: 24 August 2023

Place: UNHCR Amman Branch Office

Chaired by: Adam Musa Khalifa - UNHCR

Attendees: UNHCR, WHO, USAID, EU, Health Appeal, AMR, IMC, Medair , RHAS,HI, UNFPA,SCJ,IOM,AICS,SAMS,TDH Italy, UNICEF, Carits, CDE,IOCC,IRJ,CVT.

Follow up action points from August 2023 meeting:

Action Points from July meeting:

- WHO to share the draft budget for the measles outbreak response with HSWG members to include their feedback and share it with MOH for the non-selective vaccination campaign most probably to take place in September. The campaign was postponed due to the delay in arrival of vaccine. The budget will be shared once finalized and shared by MoH.
- UNHCR to share outcome of Global Consultation on the Health of Refugees and Migrant Workers with HSWG members.
- UNICEF to share the new guidelines on treatment of SAM and MAM cases.

WHO Updates:

- Updates on WHO's work on The Refugee and Migrant Health System Assessment: The methodology of this assessment consists of a desk review which was conducted by a national consultant followed by formation of a national committee including some of the HSWG partners. The exercise was concluded by field visits to the selected public health facilities. The assessment consisted to different pillars including the health system, public health emergencies, risk communication and community engagement, and a pillar on research. The final report is at MoH for review. The main preliminary recommendation for the health system is that MoH should establish a technical platform for refugee and migrant health. A closer collaboration among different ministries including MoH, MoI and Ministry of labor was also among the preliminary recommendations. One of the major findings was that the payments at the health facilities for different groups including registered refugees, non-registered refugees were different across different health facilities. The corresponding recommendation is to display the cost of health services at the health facilities to ensure standardization of cost of health services across the public health facilities. The key recommendation related to the area of health emergencies is to do capacity building and trainings for the relevant staff in health emergency preparedness and response at all levels. Risk assessments with a focus on the vulnerable segments of communities and streamlining the processes of the rapid response teams were also among the preliminary recommendations. Establishing a national research agenda for health research was a recommendation in the area of health research.

- The first draft of the report is finalized and is currently at MoH for review. WHO will update the partners once the review process at MoH is completed and the report is available for dissemination.

UNHCR – Camp updates:

- Epidemiological situation in the refugee camps is stable with regular activities related to the surveillance and service delivery are underway. Some transitions of the health services delivery in the camps have been planned in 2024 with a focus on nationalization and rationalization of the response and making the service delivery more cost effective. All the transitions of health operations will be done with coordination with the health partners including the relevant UN agencies using the existing health coordination structures in place in camps i.e., the health coordination forums.
- In Zaatari camp, transition of the PHC services at district 6 relates to the funding status of the three operational partners (the funding confirmation is expected in September 2023).
- In Azraq camp, PHC service delivery will continue in 2024 as per the current arrangements. Transition related to merging of PHC facilities in village 3 and 6 at a new location was concluded in 2023 and this arrangement will continue in 2024. The feedback received from the communities receiving services from the new comprehensive (merged) health facility has been satisfactory.
- For the secondary level hospital in Azraq camp, UNHCR has engaged the MoH and so far, two important visits have been conducted by the MoH jointly with UNHCR. The purpose of these visits was to observe how the camp hospital is functioning and level of services offered at the facility. The possibility of opening the hospital to the population of Azraq town for obstetric services and the potential involvement of MoH in service delivery delivered by the hospital were explored during the visits. This engagement is at the initial stage, and we will have to wait for the outcome taking into consideration all important factors.
- UNHCR, through engagement with MoH, MoI and Public Security Department (PSD) has progressed on the agenda of inclusion of refugees in the Hakeem system (the national Health Information System). As MoU was signed between the PSD and MoH to integrate the refugees' data into the Hakeem system. There was a 94.6% data compatibility between UNHCR and PSD data. UNHCR will continue to collaborate with PSD and MoH through the process of integration of refugees' data in the system. Data of both Syrian and non-Syrian refugees will be part of this initiative. By successful implementation of this intervention, the system will be able to generate segregated data for refugees accessing the public health facilities for services.
- Health Access and Utilization Survey (HAUS) was conducted, and the first draft of the report is ready after completing the analysis. This is an annual exercise conducted by UNHCR to monitor the health seeking behaviors and utilization of health services by the refugee population. The report is expected to be finalized before the next HSWG meeting and the main findings will be presented in the meeting. HUAS will be conducted for the first time in refugee camps and currently customization of the survey tools is in process for the camps. The exercise will be conducted in the last quarter of the current year in refugee camps.
- Updates on Jordan Priority Response Plan (JPRP): The objectives of the JPRP were discussed and agreed with the MoH at the sector advisory group with the involvement of the donors and relevant health partners. The workshop on JPRP will be conducted after today's HSWG to discuss the objectives, activities and indicators included under the health sector of the exercise. The aim is to make the appeal sound and reasonable and addressing the needs on ground.

- Another important update is related to the downsizing of the UNHCR supported health operations in urban areas. Irbid clinic currently operational by UNHCR implementing partner will no longer provide services from 1st January 2024. The mainstreaming plan is in process to minimize the access barriers for the refugees accessing the public health facilities after closure of the clinic.
- UNHCR has continued an intensive advocacy with MoH with support provided by the donors particularly the donors of the Multi Donor Account (MDA) to reduce the cost of the renal dialysis. The current cost of the dialysis session at MoH facilities is 60 JoD which is beyond the financial capacity of most of the refugee. After several engagements with MoH, it was agreed to reduce the cost of the dialysis session was reduced to 50% i.e., 30 JoDs. This recommendation has been sent by the MoH to the ministry of finance. Once the recommendation is final by the relevant ministries, it will be sent for cabinet approval for implementation at the public health hospitals. There are currently 200 refugees who need receiving regular dialysis sessions.
- Sensitization of the refugees on the subsidy for health services at the public health facilities and increasing the awareness of the frontline health workers on the subsidy policy will continue in future. The service guide and policy manuals developed by MoH in collaboration with UNHCR will play an important role, with support of advocacy by the MDA donors to include the refugee population in the national public health system.
- Any organizations implementing community health program can request for the copies of service guide to be distributed among the refugees' communities.

UNFPA – SRH SWG:

- The national survey for assessment of obstetric and neonatal services at the public health facilities was completed and the report is currently under review at MoH. Health facilities providing obstetric services were part of the assessment. The findings related to the breast-feeding practices which are part of the assessment were presented in the SRH sub working groups in Zaatari and Azraq refugee camps to ensure that IYCF programming takes into consideration these findings in future programming. Multiple single functions have been assessed during the assessment and breast-feeding practices is just one part of the report. Once the report is endorsed, expectedly next month, the findings will be presented in the HSWG forum. An event will also be planned in collaboration with MoH to present the findings of the assessment and recommendations included in the report.
- SRH SWG is also working on work plans related to neonatal mortality rates in refugee camps with the involvement of the relevant partners. The aim of these workplans is to improve the quality of SRH services including the maternal services in the refugee camps. Progress to reduce the neonatal mortality rate and stillbirth to the acceptable levels will be monitored regularly by implementing the workplans and engaging the relevant partners in the camps.
- A series of workshops were also conducted in collaboration with American University of Cairo and American University of Beirut with a focus on social determinants of health and equities with a specific focus on improving the maternal health and reducing the preventable maternal mortalities. We hope to produce a few research products to be used for advocacy.

MHPSS SWG

- Related to the access to mental health services, some challenges are still being faced by the refugees accessing the mental health services at the public health facilities. Some of these challenges are

related to the cost of the services. Some improvements have been however observed for the last few months in terms of access of refugees to mental health services.

- The highest age group among refugees utilizing the mental health services at the available venues are the adults followed by children with equal distribution among males and females. Majority of the refugees utilizing the MHPSS services in the urban areas are Syrian refugees constituting 75% which indicate a high reliance of refugees on the MHPSS services provided at the public health facilities. This is followed by 7% Jordanians, 5% Iraqis and the remaining by other people from other nationalities.
- The top mental health conditions newly diagnosed are depression and anxiety and the most common barrier to access the services in the invalid documentation followed by provision of medication for some neurological conditions and transportation challenges.
- There is also an observation related to the impact of WFP cut on the vouchers for refugees causing psychological stress among refugees including the refugees living in camps.
- MHPSS SWG will contribute to the exercise of JPRP including the priorities of mental health and psychosocial services among the priorities.
- 4W exercise (mapping) for MHPSS services is under planning process.

Nutrition

- We are currently discussing with UNHCR and other relevant partners to review the scope of work and downsizing our intervention by in future in the refugee camps for the nutrition interventions. There are currently low number of acute malnutrition cases in camps. New guidelines to treat SAM and MAM cases by WHO and UNICEF will be available soon to be applied. According to the new guidelines, plumpy sup will be available to the cases with medical complications. For SAM cases the plumpy NUT will be available. Coordination with MoH and other relevant partners including IMC will be continued for these changes.
- The discussion of level of support to the IMC hospital in Azraq camp by UNICEF is underway and the forum, MoH and UNHCR will be informed about the final decision in this regard. UNICEF will continue to coordinate with all relevant agencies including UNHCR and MoH for referral pathways. The cost of services provided at the camp hospital is high, UNICEF quoted.
- The clearance from JFDA for the nutrition supplies is expected to come next week. Storage of the nutrition supplies due to high temperatures in the country is a challenge. We still have a long expiry date of the items, so this is not an issue. Advocacy is needed with the MoH for expediting the clearance procedures.
- UNICEF will share the new guideline for treatment of SAM and MAM cases.

EU

- We are finalizing the budget with MoH for 2024 and once final we will share the activities to be supported in 2024. We will prioritize the activities according to the main objectives of the MoH. We are also expecting to sign the contract with WHO in November.

USAID

- The data collection for the DHS 2023 has been completed. We are thankful to the stakeholders who have contributed to the survey. Some preliminary results will be available by the end of October 2023

and the final report will be ready in January 2024. The indicators included in the survey are segregated by nationality of the sampled population.

AICS

- Prioritization for future funding is in process and are expecting some good news on the funding side from the headquarters for funding in 2024.

RHAS

- An event is scheduled in September 2023 in New York about Universal Health Coverage. There will be a high-level representation by the relevant agencies in the event including the UN agencies, MoH. RHAS is organizing an event that is focused on USC with regards to NCDs and we are inviting the relevant agencies with a hope of policy brief and recommendations related to NCDs and UHC. The recommendations will be provided to the MoH and the Jordanian delegation attending the event in NY in September 2023. We have already sent the invitations and we would encourage the participation by the relevant agencies in workshop.

AMR:

- The activities under the current projects are underway. The handing-taking over of the PHC facility in village five is smoothly in process. We are also in the phase of discussion to continue the services in the PHC in village. In Zaatari camp, we are also planning to continue the service in the MCH center from the beginning of 2024. The negotiations with the donor for funding the AMR PHC facility in Zaatari camp are underway and we are expecting to have the final decision very soon.

Medair

- We have conducted trainings in the first week of August for the community health volunteers in collaboration with MoH for the measles vaccination campaign. The volunteers have started to conduct the household visits to raise awareness of the communities on the importance of vaccination and Measles prevention. Medair got approval from PRM for two years. This fund will cover the activities under the cash for health and community health program. An additional fund from our donor AAF has also been confirmed for 16 months for the same activities. We are in process of obtaining the approval from the government for the project.

HI:

- The rehabilitation services are being supported at PHC Sakhra. For the early childhood, his excellency the Minister of Health signed the early detection training package. After this endorsement, we will start piloting this intervention next month and provide training to the staff of the PHCs. We have recently signed an agreement with MoH and MOSD and HCV for deinstitutionalization.

CVT

- We are planning to conduct a screening day on next Monday. We will provide medical assessment for the children under one year for the cardiac and orthopedic anomalies. For the detected cases, we will provide the needed assistance/treatment. There will be cardiac mission next week and orthopedic

surgical mission in September for the children under the age of 18. The HSWG member can refer the cases in need of interventions provided by the mentioned surgical missions.

SAMS

- Funding for dental clinic in north has been obtained and we are in process of obtaining the approval from MoH for licensing. We are expecting to start delivering the services in the beginning of next year. The rehabilitation project in Wadi Seer will continue until the end of this year. By the end of the current year, we will either hand over the service to MoH or stop the project. Other services including service PHC services are continuing in Zaatari camp. MHPSS services are continued in Irbid and Amman.

IOM

- For the truck driver campaign, we will provide the final report and present the findings to the HSWG members by the end of October. In the next phase, we have started the data collection for the new population who have arrived in Jordan for treatment. We have also provided the MoH with the needed equipment for data collection. The quantitative and qualitative data collection will help to design appropriate interventions in future programming.

AOB

- For health-related research projects by individuals and organizations involving refugees particularly in the refugee camps, there is a standard process of approval and endorsement by HSWG research committee and MoH. The HSWG research committee consists of 4 members from UN agencies including one member each from UNHCR, WHO, UNICEF and UNFPA. Endorsement at MoH for the research projects takes place independently. The standard process for review of the research projects by HSWG research committee will be shared with the members when it is final. In the meantime, all the applications for the research projects can be shared with Muhammad Fawad from UNHCR (FAWAD@UNHCR.ORG).
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