

# INTER-AGENCY REGIONAL RESPONSE FOR SYRIAN REFUGEES

## HEALTH AND NUTRITION BIWEEKLY

Egypt, Iraq, Jordan, and Lebanon

April 28-May 11 2013

### HIGHLIGHTS

- **Population movement** – refugee numbers in the region continue to increase. Since May 1, there were more than 76,000 new refugees; at least 75% of those registered are women and children.
- **Operational** – Jordanian Ministry of Health and Interior Ministries agreed to relocation of new arrivals registration to Raba Sahana; health screening including immunization will occur here thus enhancing vaccination activities for new arrivals. In Lebanon, coordination skills training sessions was organized by UNHCR and OCHA on May 9.
- **Mortality** – mortality indicators continue to show low under 5 mortality and crude death rates in refugee camps in Iraq and Jordan. However, considering high numbers of new refugee arrivals and possibility of disease outbreaks during summer months, active monitoring of deaths must continue.
- **Primary health care** – as before, acute respiratory infections and diarrhoea remain major causes of acute illness; high incidence of diarrhoea observed in Domiz camp, Iraq in previous weeks has begun to subside.
- **Disease outbreaks** – **measles** continues to be reported across region. In Jordan, one new case in a refugee who was in camp for <2 weeks was reported, bringing total identified in Za'atri since Feb. to six cases (attack rate 0.01%, case fatality ratio 0%); because latest case likely infected before arrival, there is not sufficient evidence of intra-camp transmission. Mass measles vaccination campaign was undertaken in new Emirati-Jordanian camp. In Domiz, Iraq, 10 new cases of suspected measles have been identified during this period; since Dec. 2012, when first cases were detected, 375 cases (confirmed and suspect) have been recorded (attack rate 1.1%, case fatality ratio 0%).



Latrines located near refugee dwellings in Domiz camp, Iraq. Sanitation situation in camp is a growing concern for health authorities in Dohuk, Iraq  
Photo: UNHCR | Marian Schilperoord

## POPULATION

- Large numbers of Syrians continue to flee to neighbouring countries to seek refuge from ongoing conflict in Syria. Since beginning of the Syria crisis, a total of **1.5 million refugees** have been registered or are awaiting registration in Egypt, Jordan, Lebanon, Iraq and Turkey. Since May 1, there were more than 76,000 new refugees in the region and at least 75% are women and children. Refugee population by country: Egypt - 66,922; Iraq - 147,464; Jordan - 473,587; Lebanon - 474,461; and Turkey - 347,815.

## JORDAN

### Operational highlights

- Jordanian Ministry of Health (MoH) and the Ministry of Interior agreed to relocation of new arrivals registration to Raba Sahau; health screening including immunization will occur here and this will further enhance capacity of IOM and MoH to complete vaccination of new arrivals.
- Médecins du Monde has expanded access of refugees in newer areas of Za'atri camp to health care by opening a second clinic.

### Primary health care (PHC) in Za'atri camp

- There were 19,959 **consultations** per week during reporting period; a rate of visitation equivalent to 18 per 100 refugees per week.
- Mortality** remains low among refugees. Figure 1 shows trends for Za'atri camp since January 2013. Under 5 mortality rate (U5MR) has consistently remained below 0.30 per 10,000 per day and has declined in the last few weeks. Crude death rate (CDR) remains low. However, in Za'atri, deaths due to burns continue to concern authorities.
- Communicable diseases:** Major causes of morbidity remain acute respiratory tract infections (ARIs) and diarrhoea. During reporting period, 47% of patients seeking care for acute illness presented with ARI and 7% presented with diarrhoea.
- Tuberculosis (TB):** Seven 7 cases of TB were detected during reporting period.
- Non-communicable diseases (NCDs):** among 8,893 visits due to NCDs, 19% were cardiovascular disease, 18% lung disease, and 13% diabetes.

### Disease surveillance

- Measles:** one new case of measles was detected in Za'atri camp during reporting period; refugee was in camp for <2 weeks before onset of symptoms, likely was infected in Syria before arrival. Since Feb., total of 6 cases and no deaths reported (attack rate 0.01%, case fatality ratio 0%). Following successful mass vaccinations in Za'atri, campaign targeting 6 months to 30 year olds was done in Emirati-Jordanian camp by MoH in collaboration with UNICEF; total of 2,031 persons were vaccinated.

**Referrals:** The exceptional care committee met on April 30. Committee reviewed 149 referral cases (84 Syrians, 59 Iraqis and 6 other nationalities). Referral cases approved, denied and pending are 142 cases (including 114 pre-approved emergency referrals), 4, and 3 respectively. For Syrian refugees, Figure 2 shows major conditions for referrals.

**Reproductive health:** Meeting of reproductive health working group in Za'atri resolved to standardise registers used by partners. UNFPA will provide anti-D immunoglobulin and oxytocin to all partners carrying out deliveries in Za'atri.

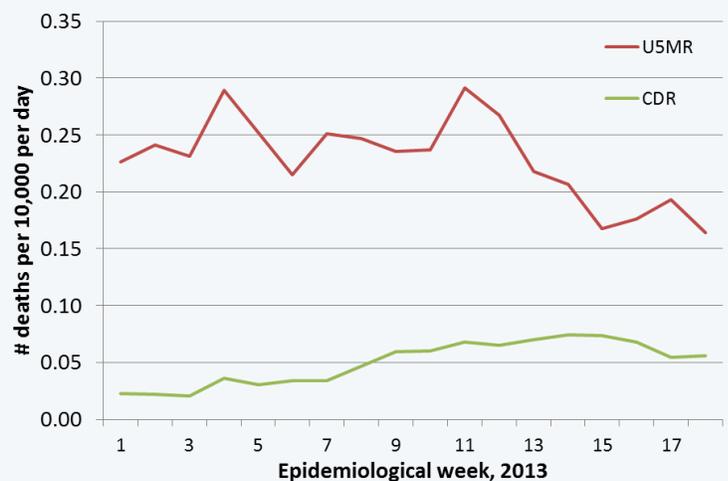


Figure 1 – Mortality\* trends, Za'atri, Jordan, Jan – May 2013

\*to minimise bias, weekly rates calculated are for 8 consecutive weeks

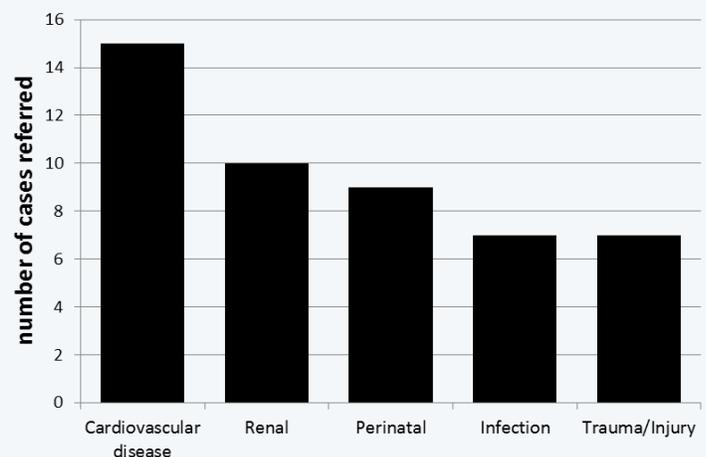


Figure 2 – Top 5 conditions for referral in Jordan among Syrian refugees, April 2013

**Mental health:** 377 cases of mental health disorders were seen at facilities with severe emotional disorder (19%), psychotic disorder (18%) and epilepsy/seizures (18%) being leading causes of health facility visitations.

**Nutrition:** During reporting period, >1,500 mothers and 700 children visited two infant and young child feeding (IYCF) caravans in Za'atri camp and >2,000 children and lactating mothers received nutritional supplementation.

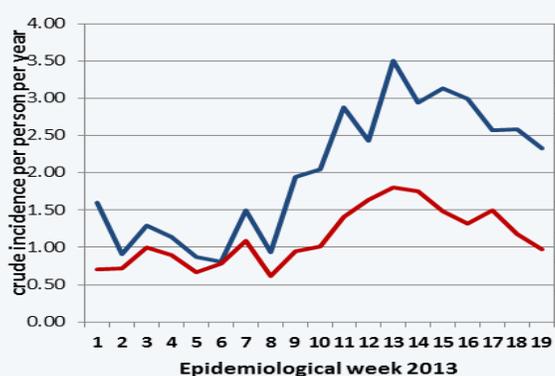
## IRAQ

### Operational highlights

- High level coordination meeting attended by representatives of Kurdistan regional government occurred in Erbil; meeting focused on establishment of new camp in Erbil governorate.
- Security in Anbar continues to affect health service access in Al-quaim camp; all non-emergency referrals have been stopped.
- In Erbil, vaccination campaign is underway for out of camp refugees. This activity was done using the urban mapping done by UNHCR and ACTED.

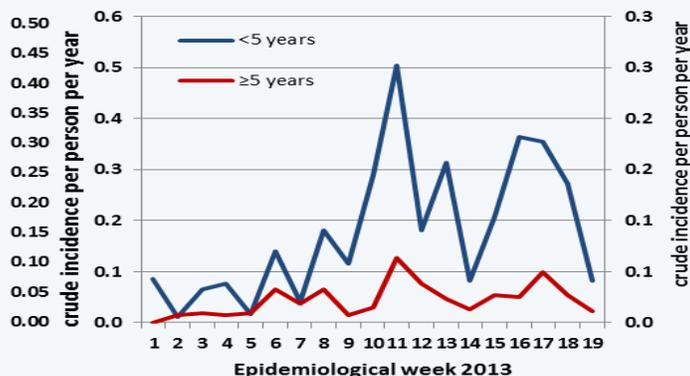
### Primary health care (PHC)

- **Outpatient consultations** in Domiz camp, Iraq during two weeks ending May 11 were 6,754.
- **Mortality** remains low; CMR and U5MR rates were <0.5 per 1000 per month.
- **Communicable diseases:** Approximately 42% and 13% of consultations were due to acute respiratory infections and diarrhoea respectively. Figures 3 and 4 below shows the incidence trends for watery and bloody diarrhoea in the past 19 weeks. There is some evidence that incidence of diarrhoea is declining from the peaks observed in April. However, due to poor sanitation conditions and overcrowding, there is substantial risk of diarrhoeal disease outbreaks including cholera. The Department of Health in Dohuk governorate in collaboration with UNHCR and partners are undertaking multiple interventions to improve conditions and further decrease risk of disease outbreaks.



**Figure 3** – Trends of weekly incidence of watery diarrhoea, Domiz camp, Iraq, Jan. – May 2013

Note: axis scales for primary (<5 years) and secondary (≥5 years) axes are different; incidence for ≥5 years is **always** shown on the secondary (right) axis.



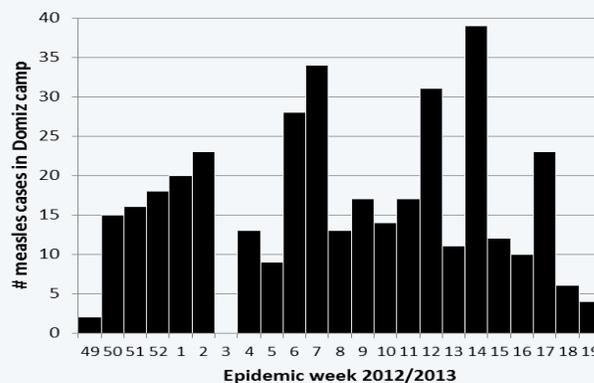
**Figure 4** – Trends of weekly incidence of bloody diarrhoea, Domiz camp, Iraq, Jan – May 2013

- **Tuberculosis (TB):** 6 cases of suspected TB were identified in Domiz camp. All were negative for TB smear.
- **Non-communicable diseases (NCDs):** 508 persons with NCDs were consulted in Domiz; 44% had cardiovascular disease and 13% lung disease.

**Disease surveillance:** Measles continues to be reported from Domiz camp. In past two weeks, 10 new cases of suspect measles cases were identified. Since Dec. 2012, when first cases were detected, 375 cases have been recorded (attack rate 1.1%, case fatality ratio 0%) (Figure 5).

**Referral care:** In Domiz, there were 377 referrals including 41 emergency referrals during reporting period.

## LEBANON



**Figure 5** – Weekly reported measles, Domiz camp, Iraq, Dec. – May. 2013

## Operational highlights

Coordination skills training sessions organized by UNHCR and OCHA on May 9; 68 participants from UN agencies and NGOs attended.

## Primary health care (PHC)

On average every week, approx. 1700 refugees sought care at facilities and mobile clinics supported by UNHCR and partners.

## Disease surveillance

- **Measles** – since January, there have been 797 measles cases reported by the Lebanese MOH. Among them, 98 were in Syrian refugees. Since the beginning of May, there have been 95 cases reported including 9 Syrian refugees.
- **Cutaneous leishmaniasis** – Since Jan. 2013, 149 cases including 19 new cases during this reporting period were identified by Lebanese health authorities; almost all among Syrian refugees.
- **Scabies** – In the Bekaa region, 33 new cases of scabies were reported.

## Mental health

Services continue to be provided by IMC; approx. 510 patients received clinical and/or social support every week.

## Referral care

On average >500 persons were admitted weekly to partner supported hospitals in Beirut, South Lebanon, North Lebanon and Bekaa. Main reasons for admission were obstetrical incl. emergency deliveries; surgical including trauma care; and gastrointestinal conditions; other reasons were cardiovascular disease and urological conditions.

## EGYPT

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### Primary health care (PHC)

On average every week, UNHCR and partners (Refuge Egypt and Mahmoud Hospital) provided PHC services to >150 Syrian refugees among them approx. 40% were children <5 years.

### Referral care

UNHCR-supported PHCs referred approx. 66 patients each week.

## Acknowledgment

The regional response for Syrian refugees is the coordinated efforts of more than 61 agencies. We especially acknowledge the contributions of the following partners.

**ACF | ACTED | AJEM Lebanon | ALEF | Amel | CARITAS | CLMC | CVT | FHSUOB | GSF | HI | HRC | ICRC | IFH/NHF | IFRC | IMC | IOCC | IOM | IRC | IRD | IRW | JHAS | JICA | KRG | MdM | MF | MODM | MoH Iraq | MoH Jordan | MoH Lebanon | MSF | PRCS | PU-AMI | Qandil | QRC | RESTART | SC | UNFPA | UNICEF | UPP | WFP | WHO | YMCA**

*This report was compiled by UNHCR Regional Refugee Coordination, Amman, Jordan. For more information or to be added to the distribution list please contact the UNHCR Regional Public Health Officer at [ahmedja@unhcr.org](mailto:ahmedja@unhcr.org) or the Senior Regional Public Health Officer at [khalifaa@unhcr.org](mailto:khalifaa@unhcr.org). Additional information on the Syria Regional Refugee Response can be found on the UNHCR webportal at <http://data.unhcr.org/syrianrefugees/regional.php>*

**Note:** The information presented in this bulletin is based on the most recent and best available data. UNHCR and its partners will continually update and, where necessary, modify the data and analysis provided, in order to ensure that the most current and accurate view is available to key stakeholders and the public.