

Weekly Report
Public Health and Nutrition Jordan
Week 49 HIS
Report Date December 17th 2013

1. Operational Highlights and Situation update

- Number of confirmed polio cases in Syria is 17 including one case in Aleppo and one in rural Damascus; the remainder are in Deir Ezzor
- First meeting of Community Health Task Force on 8th December chaired by IFRC
- UNFPA/JHAS clinic opened in district 8 in Zaatri on 10th of December; the clinic provides ANC, PNC and family planning services
- MSF closed their paediatric hospital in Zaatri at the end of November
- Marked increase in the caesarean section rate in Zaatri at 39% of deliveries
- 14,592 services were provided at MoH primary health centres in Irbid governorate for Syrians in November compared to 12,725 in October.
- Number of new arrivals reduced markedly over last few days since the 11th December due to the weather and reduced army patrols along the border.
- Extremely cold weather hits Jordan with snow storm affecting much of Amman and parts of the South; Zaatri spared snow but approximate 300 refugees move to child friendly spaces to escape the cold.
- 10 deaths in Zaatri from 1st December to the 15th including five in children (three neonatal deaths); one in a child born at 25 weeks gestational age, one associated with neonatal sepsis, one with congenital heart disease who died at two days of age). This compares with the month of November when there were 21 deaths, six in children (including four neonatal deaths - three associated with preterm delivery). Community health volunteers in Zaatri are intensifying home visits to vulnerable households and particularly disabled to ensure they are adequately prepared for the winter. Heater distribution started in Zaatri on the 15th and will take 7 to 10 days to reach all households.

2. Population

Total Syrian persons of concern in Jordan are 566,303. New arrivals have increased to 2,999 new arrivals registered between 3rd to 9th of December 2013. The reported population of refugees in Zaatri has reduced as a result the preliminary measures associated with the verification and the population is now

estimated at 81,238. Number of new arrivals reduced markedly since the 11th due to the weather and reduced army patrols.

Total active Syrians registered with UNHCR in Jordan	566,303
Number of Syrians waiting to be registered with UNHCR	0
Number of persons collecting WFP ration in Zaatari*	81,238
Number registered in Emirati Jordanian Camp	3,771
Number of new arrivals from 3 rd of Dec to 9 th of Dec2013	2,999

*Second distribution cycle in November

3. Coordination and Assessments

- IMC started an assessment relating to health of urban refugees. The aim is to determine which health conditions are most heavily impacting Syrian refugees residing in non-camp settings throughout Jordan, the ability of the refugees to manage these conditions, and the primary barriers preventing them from accessing the necessary health services. 30 assessment sites have been selected (15 sites in the north, 13 sites in the central region and 2 sites in the south). Methodology includes 2 focus groups per site (one male one female), sociodemographic questionnaire and in-depth interviews (evenly distributed male and females) relating to management of chronic, non communicable diseases. 3 assessment teams (each comprised of 2 men, 2 women) started field work on 8th December. The findings will inform IMC's mobile medical unit program, as well as other health/refugee relief organizations. The assessment is funded by UNHCR.
- First meeting of the Community health Task Force was held on the 8th of December; the Task Force is chaired by IFRC. **Main Outcomes:** Agreed objective of CHTF is to harmonise approach to CH, share tools and find similarities in community health programming; Investigate and engage with MoH to discuss CHW role and whether the role exists within MoH system of health care providers; invite MoH to next meeting; Agreed to have a general consensus and definition on what is the scope of the CHV/W and to have a consistent term describing then (e.g. CHW or CHV?); Development of a draft role (job) description for a CH Volunteer and share for comments. Agreed to develop a matrix to map CH activities and include training curricula, tool-kit and IEC material which can be shared in order to be able to develop a harmonized tool-kit. Agreed to meet monthly with ongoing work/communication through e-mail.
- Jordan Valley Assessment Multisectoral Assessment finished on the 5th December. **Main preliminary findings:** Registration. Almost all families interviewed were registered with UNHCR and had a Ministry of Interior card. Health Care Access: Most refugees living in the Jordan Valley do not have an MOI card issued in their area of current residence and therefore don't have access to health services unless they travel to other governorates or pay for

health services. Immunization: All children are vaccinated during the recent immunization campaign but they do not know about the routine immunization programs and usually none of refugees are going to health facilities for routine immunization of their children. Education: Vast majority of refugee children in JV are NOT going to school, due to transportation cost or there is no regular transportation from the area where they are living to the schools. WASH: Most are buying drinking water. The cost per one cubic meter of drinking water is 3 Jordanian Dinar. They do not have proper sanitation facilities; either they are using community toilets and small local made latrines. Usually there are not separate toilets for male and female. Food: They have coupons/food vouchers which are not enough for each family member. They location of markets are far from the area as they have to go to Salt, Mafraq or Amman to get their food rations. Transportation cost, which is 15JD to go and obtain the food items. Not always availability of the items they need in the market and had to get salt instead of sugar or sugar instead of rice. Few complained that markets charge more for them compared to those they pay in cash. Shelter: All shelters were temporary, failing to protect them from summer and winter and do not provide privacy. In a separate note they (almost) all, bought the shelter from Mafraq area. Also the land that they put their tent is not free and they have to pay a rent for that. Heating and cooking: Using wood from trees for cooking and heat and some are using gas for the same purpose.

- Irbid health coordination meeting took place on Tuesday 10 December in the Irbid Directorate of Health and chaired by the Director of Health. National and international NGO health providers in Irbid participated in the meeting.
- Mafraq Health Directorate Coordination Meeting took place on the 11th of December chaired by MoH. **Main outcomes**: UNICEF will engage WASH actors in assisting the Health and Education Directorates in improving WASH facilities in the most overcrowded schools in response to the increased hepatitis cases. MOH will assess school meals programmes and hygiene standards

4. New arrivals

- IOM has completed the health reception, screening, triage and vaccination area in Raba Sarhan. They will be ready to move these activities from Zaatri once Raba Sarhan opens.

5. Health services

Urban

- Irbid Directorate of Health reported that more than 5000 Syrian school children were found to have head lice upon inspection. This was in 15 schools out of the 17 double shifted schools which have mainly Syrian

children. UNHCR is arranging to provide the Directorate of Health with 5000 anti-lice shampoo and fine toothed combs through JHAS.

- MoH in Irbid in collaboration with WHO has planned a 2-day training meeting for nurses which will take place on 11-12 December and will cover the following subjects: EPI in Jordan, surveillance and reporting of communicable diseases, ethical considerations, documentation, data collection and data analysis.
- MoH services in Irbid governorate for Syrian in November reported by Irbid Directorate of Health: 14,592 services were provided at PHCs compared to 12,725 in October. In hospitals, a total of 136 surgeries were provided, 604 admissions and 6794 outpatient services. Highest number of surgeries (73) and admissions (604) took place in Princess Badea Hospital. Highest number of outpatient services (2616) were provided in Princess Basma Hospital
- UNHCR undertook a training of 19 staff from 7 urban clinics of JHAS and Caritas in the urban health information system; a pilot will start next week in some UNHCR supported clinics. The urban HIS is expected to be operational from January 2014. MoH case definitions for priority diseases under surveillance will be used once these are finalized.

Zaatari

- 3 deaths in Zaatari including two neonatal deaths in week 49;
- Bed occupancy in Zaatari is 39%

6. Immunization

- Zaatari mass campaign completed from the 20th to the 28th November. 20 fixed teams and 8 mobile teams carried out the campaign under MoH supervision; each team composed of 5 persons (one from MoH, one or two from IOM and 3 refugee community health volunteers from IRD). 45,891 people vaccinated against measles/rubella (administrative coverage = 105 %); 14,053 children aged 6 months to 59 months received Vitamin A (administrative coverage = 109%) and 15,319 children aged 0 to 59 months received polio = (administrative coverage was = 106%).

7. Communicable diseases and outbreak prone diseases

- Increased cases of Hepatitis A observed in Mafraq Governorate amongst school children especially in North Badeea; there are over 10,000 Syrians attending schools in Mafraq Governorate. The following actions have been taken by the Health Directorate and Education Directorate:
 - Intensive hygiene promotion in schools through outreach workers and teachers

- Improve latrines and handwashing facilities with priority being given to those schools with more cases and worse WASH indicators.
- Reduce crowding in schools with more portable classrooms and increase the number of schools doing double shifts.
- Ensure appropriate hygiene and food safety standards in those schools with meal programmes.

8. Reproductive health

- 56 live births in Zaatri in week 49 and 1 stillbirth; low birth weight 11%; caesarean section rate has markedly increased to 39%. The reasons are being investigated.
- In Zaatri, the UNFPA/JHAS clinic taking care of uncomplicated vaginal deliveries is currently facing a challenge for the referral of women to other hospitals or clinics when it is medically necessary. For many reasons, access to appropriate services can be delayed.
- UNFPA/ Aman provided gynecology and obstetrics consultations, antenatal and postnatal care consultations, and family planning methods (condoms, IUDs, pills, injectables) to 415 women and girls both in the city of Amman (2 clinics) and in two mobile units in the Jordan Valley and Southern governorates.
In Amman, UNFPA/Aman sensitized 56 women on reproductive health issues including IUD efficacy, safety, and advantages.