

Health Sector Jordan

Bi-weekly Report

March 30th 2014



© UNHCR Jared Kohler

Population data

Total active Syrians registered with UNHCR in Jordan (as of 30 March 2014)	588,979
Number of Syrians waiting to be registered with UNHCR	0
Number of persons collecting WFP rations in Zaatari*	98,974
Number of Syrians registered in Emirati Jordanian Camp (as of 29 March 2014)	3,834
Number of new arrivals between 18 and 29 March	5,701

* As of second distribution cycle in March 2014

Operational highlights and situation updates

- One case of polio was confirmed in Iraq, bringing the total number of confirmed cases in the region to 26 (including the 25 confirmed cases in Syria).
- MSF Holland opened a 20-bed facility in Zaatari camp on the 27th of March for convalescence of war wounded from their facility in Ramtha hospital.
- WFP have phased out of the general food ration in Zaatari and replaced it with a voucher to the value of 10 JD per person every two weeks.
- Nutrition survey training will start on the 5th of April.

Coordination and assessments

- **Results of several assessments** conducted over the past months were presented on 20th March at a meeting organised by UNHCR and attended by over 50 participants representing over 30 organisations. Presentations were given on the following assessments: **M**ultisectoral assessment of Syrians in the Jordan Valley (EMPHNET); **S**ituation of vulnerable refugees in Jordan and Lebanon – December 2013 (Handicap International/HelpAge); **U**nmet health and psychosocial needs of Syrian refugees in Zarqa Governorate (PU-AMI); **P**opulation-based health access assessment for Syrian refugees in non-camp settings throughout Jordan (IMC); **A**ssessment of mental health and psychosocial needs of displaced Syrians in Jordan (IMC/WHO/MOH/EMPHNET). Main outcomes of discussions were: 1) UNHCR registration needs to improve capture of data on refugees with disabilities; 2) There is a need for increased coordination in non-camp initiatives; 3) Psycho-social needs in cases of disabilities, chronic

diseases and injuries should be addressed; 4) Replicable models for NCD management need to be explored.

- **Monthly MHPSS** meeting held on 19th March at the Ministry of Health (MoH); REACH presented the key findings of several assessments recently conducted in Zaatari camp and host communities, including a key informant assessment in the four northern governorates (Mafraq, Irbid, Jerash, and Ajloun) as well as Balqa and Zarqa, which focused on access to services by Syrian refugees relating to thematic sectors, and their prioritized needs by sector; in addition, the sub-working group ToRs have now been finalized.
- **Monthly Reproductive Health** meeting held on 25th March at the UNFPA office in Amman. Main outcomes: working group will develop a performance assessment tool to monitor quality of reproductive health programmes currently being implemented by NGOs; a service map created by subgroup members was completed and is on the inter-agency information portal; sub-working group ToRs completed and endorsed by the group members.
- **Nutrition Sub-Working Group** meeting held on 25th March at the Save the Children Jordan office in Amman; main highlights: information on Vitamin D deficiency in breastfed infants will be sought; MoH nutritional surveillance initiatives will be explored and if possible adapted to the refugee situation; WHO EMRO Regional Nutrition Strategy will be reviewed with a view to incorporating relevant regional priorities in the Syrian response.
- **Nutrition Survey** consultant has arrived, survey is scheduled to start in April and data collection should take around 20 days; the survey will assess anthropometry, immunization coverage for measles and polio, two diarrhoea prevalence, household food security, anaemia in children under five and women of reproductive age. The survey will take place in Zaatari and mainly in governorates with high concentration of Syrian refugees (Amman, Irbid, Jerash, Ajloun, Mafraq and Zarqa). The survey is joint initiative of UNHCR, UNICEF, WFP, WHO, and UNFPA. Medair will be carrying out the survey with support of UNHCR survey consultant and CDC.
- **Monthly Health Coordination Meeting** held on 27th March in Amman; main outcomes: 1) UNHCR came across a few MoH centres not providing vaccinations to refugees with expired registration documents, and a letter was circulated by MoH stating that all nationalities, regardless of documentation status, should be vaccinated; 2) Permethrin for treatment of scabies has been imported by JHAS and cleared by JFDA, now available in JHAS clinics. It is essential that along with the medication, patients be given instructions on appropriate hygiene measures that need to be undertaken in order to prevent the disease from reoccurring; 3) War wounded task force will be reactivated, as there has been an increase in numbers of wounded crossing the border; 4) There is a need to strengthen AFP surveillance in Jordan and this will be addressed in the coming months.
- **Health Sector Strategic Advisory Group meeting on 25th March, hosted by IMC:** Main outcomes: 1) Development of wider Humanitarian Health Strategy for the Health Sector Working Group currently in process; 2) A list of suggested research topics was drafted; 3) First draft of Guidance for the Conduct of Research in the refugee response in Jordan was reviewed.
- **Community Health Task Force** met in the third week of March, finalized the Community Health Strategy and compiled IEC materials into a matrix. The agreement on incentives for Community Health Volunteers are proving to be a challenge as there are limitations on how many hours a volunteer can work, and a cap on incentives, before they are required to become contracted employees.

- **Non-Communicable Diseases Task Force** met on 25th March. The MoH guidelines on hypertension were discussed. It was agreed that there was a need to provide more specific guidance on first and second line medications for service providers. A proposed minimum package of medications and diagnostics for the most common NCDs was presented by IMC and MDM and will be further refined. EMPHNET will do a literature review on NCDs in the region and a health facility assessment on quality of NCD services in MoH facilities and possibly interested NGO facilities will be conducted.

Health Services

Urban

- A visit was conducted by UNHCR to Al Aman Center in Mafraq which is a rehabilitation centre for war wounded patients. The centre was established July 2013. Since then they have had 34 cases enrolled in their program. Most of the cases are from Al Duleil hospital and are in need of special care for their wounds. The maximum time to host a case is one month. Their bed capacity is 18 beds and they are planning to increase it to 22–25. There is a visiting specialist once a week and other staff includes two doctors, nurses and physiotherapist. The facility is disability friendly with bathrooms designed for the needs of the disabled.
- MDM in Ramtha has started to provide routine vaccination to Syrians refugees with support of the Ministry of Health
- Handicap International have opened two new fixed services in Amman at JHAS Al Madina and JHAS Abu Naseer. These will assist in identifying those with disabilities and providing physical rehabilitation.

Zaatari

- Challenges faced on dealing with war wounded unaccompanied patients brought to the camp after being discharged from the hospitals outside the camp; these challenges include finding care givers for persons who are unable to fully care for themselves, often no medical reports about the case with treatment and follow up plans; little coordination with JHAS in the camp when the injured refugees are arriving. In one week, two quadriplegics and one hemiplegic arrived in Zaatari with no communications from the receiving hospital. UNHCR will follow up with sending hospitals in order to improve discharge planning and communication.
- MSF Holland opened a 20-bed facility in Zaatari camp on the 27th of March for convalescence of war wounded from their facility in Ramtha hospital. This is for non-acute care of those with severe fractures or who need pain management, dressings and physiotherapy. It is open 24 hours and staffed by two doctors and 11 nurses. They are also open to receiving patients who fit the above criteria from other facilities, space permitting.
- FPSC distributed orthoses and mobility aids including wheelchairs to 21 children with cerebral palsy.
- At the five oral rehydration treatment (ORT) corners in the camp, from 1–20 March, 130 children (76 girls, 54 boys) under 2 years old and 106 children (53 girls, 53 boys) aged 2–5 years old were rehydrated on site; 145 children (81 girls, 64 boys) under 2 years old and 111 children (54 girls, 57 boys) aged 2–5 years old received oral rehydration solution for use at home. The

majority of cases were watery diarrhoea with no dehydration, and only 11 of them (four girls, seven boys, all under the age of two years) were referred to Diarrhoeal Treatment Units for further management.

- On 17–18 March, a two-day on-the-job Integrated Management of Childhood Illness training was conducted for 15 nurses (8 JHAS, 4 MDM, 2 Saudi clinic and 1 from SCJ) working in the camp. The training, conducted by five master trainers from MoH with UNICEF technical and financial support, took place in two clinics in the camp (JHAS and MDM), and included theory training, video sessions and practical training on registration books.

Azraq

- Structure for IMC PHC comprehensive centre in Village 6 is now complete.
- Civil Defence ambulances will not be available until the end of May, but Civil Defence have confirmed when Azraq opens they will deploy at least one ambulance and one fire engine.
- Immunization: Ministry of Health identified health staff (2 vaccinators) who can come twice a week to the camp (Monday and Thursday); UNICEF will provide the fridge for cold chain; IMC will provide the furniture, medical equipment and supply the monthly fuel for the cold chain.

Immunization

- From 1–13 March, 978 children (492 girls, 486 boys) aged between 1–18 months received routine EPI at fixed vaccination sites (MDM clinic 2, JHAS, Saudi clinic, MDM clinic 1, UNFPA/JHAS). In addition, another 243 children (113 girls, 130 boys) were vaccinated during the ongoing UNHCR verification process.
- Also from 1–13 March, 221 women (101 pregnant, 120 non-pregnant) received TT-1 vaccines, and another 404 (123 pregnant, 281 non-pregnant) received TT+2 vaccines at fixed vaccination sites. In addition, 86 women (23 pregnant, 63 non-pregnant) received TT-1 vaccines, and 55 women (17 pregnant, 38 non-pregnant) received TT+2 vaccines during the verification process.

Communicable diseases and outbreak prone diseases

- Jordan remains on alert for polio cases after one case of polio due to wild poliovirus type 1 (WPV1) was reported from Iraq – the first polio case in the country in 14 years. A six-month-old boy from Baghdad, who had not been immunized, developed paralysis on 10 February 2014. According to the Global Polio Eradication Initiative, “genetic sequencing indicates the virus is most closely related to virus detected in Syria. WPV1 was also isolated from the child’s three-year old sister, who did not develop symptoms.”
- Three measles cases in new arrivals in Zaatari (two confirmed and one epidemiologically linked).

Reproductive Health

- As a follow-up the clinical management of sexual violence training conducted in 2013 mentoring visits were conducted by IFH/NHF using facility and personnel assessment checklists. This was in collaboration with UNFPA and IRC. This activity will help to identify gaps and prioritize activities.
- From 1–27 March, UNICEF distributed 158 new-born baby health kits to new-born babies (72 girls, 86 boys), and 158 mother kits to new mothers during their discharge from the delivery rooms in Zaatari camp.

Nutrition

- During the first three weeks of March, 2,505 pregnant and lactating mothers were reached with infant and young child feeding (IYCF) promotion and counselling through UNICEF/ SCJ IYCF centres in Zaatari, EJC camps and host community, and 6,477 children under five and lactating mothers received nutritional snacks.
- Currently 34 children are receiving SAM treatment through JHAS in Zaatari.
- Save the Children Jordan undertook the first distribution of Supercereal to all children in Zaatari aged 6 to 23 months, starting on 30 March, for three days.
- WFP have phased out of the general food ration in Zaatari and replaced it with a voucher to the value of 10 JD per person every two weeks.

Secondary and tertiary care

- Exceptional Care Committee held at UNHCR on 26th March. There were 112 emergency cases reviewed and all were approved (Syrian 68, Iraqi 33, Sudanese 4, Somali 6, other 1). There were 53 non-emergency cases. Of these 50 were approved; 16 final approval (1 Iraqi, 1 Sudanese, 14 Syrian) and 34 initial approval pending budget availability (15 Iraqis); two are pending and one denied.

Mental health

- IMC conducted a one day psychological first aid training for 40 staff of NRC, JHAS and UNHCR who are working in the reception centre in Zaatri
- Finn Church Aid is providing mainly recreational activities targeting youth (15-24). Currently working in Zaatari and King Abdullah Park, and awaiting approvals to operate in host communities and Azraq.