

Health Sector Coordination Meeting

Date: Thursday, 31st March 2022	Venue: MS-Teams Virtual [UNHCR]	Time: From 11:00 to 01:00
Attendance: UNHCR, WHO, MOH, IMC, IRC, JPS, Medair, HI, IOCC, IOM, ICRC, MOH, EMPHNET, MSF, Caritas, SAMS, Humani-terra, Help - Hilfe zur Selbsthilfe, MIRRA, UPP, CVT, Save the Children, MSF, Qatari Red Crescent, Islamic Relief Jordan, AMR, Health Appeal, Habitat Jordan, UNICEF, UNFPA, TDH Italy, chainedelespoir, US State, Uossm, ICRC, UN, uottawa.		
Agenda		
1. Review of Action Points from the previous meeting.		
2. WHO/MOH update on COVID-19.		
3. UNHCR update on the COVID-19 Situation and vaccination in refugee camps (Zaatari , Azraq & EJC)		
4. Partners updates Urban.		
5. AOB		
1. Review of Action Points from the previous meeting		
Sector Chair [UNHCR]	Dr. Adam / UNHCR the Health Sector Chair and Dr. Saverio BELLIZZI, the Co-chair from WHO welcomed the audience and introduced the agenda of the meeting . Progress on action points from last month meeting: <ul style="list-style-type: none"> • No pending action points 	
2. WHO/MOH update on COVID-19		
WHO	WHO Update: Global/Regional Epidemiological updates on COVID-19: (As of 23rd February 2022):	

Dr. Saverio BELLIZZI from WHO provide an update on global and regional Covid-status:

WHO global update: As of yesterday, 30th of March 2022,

- In the last epidemiological week over 10 million new cases were reported with over 45,000 new deaths.
- All regions reported a decreasing trend in the number of a new weekly cases and four out of five regions reported a decreasing trend in a new weekly death.
- Since the onset of the pandemic the cumulative number of confirmed cases reported globally is around 480 million and the cumulative number of deaths is over 6 million.
- Between the end of January and early March 2022, there was a decreasing trend in the number of new COVID-19 cases, which was followed by two consecutive weeks of increases in cases.
- During the week of 21 - 27 March 2022, the number of new cases declined of 14% decrease as compared to the previous week. While , during the same period, the number of new weekly deaths increased by 43%, likely driven by reasons like the retrospective adjustments reported from India in the South-East Asia Region, Chile, and some other South American country. So, there is a backlog of registered deaths.
- At the last epidemiological week , the highest number of new cases was reported from the Republic of Korea, Germany, Vietnam, France, and Italy.
- The trends reported above should be interpreted with caution as several countries are progressively changing their COVID-19 testing strategies, resulting in lower overall numbers of tests performed and consequently lower numbers of cases detected.
- Despite a generalized decline in the rate Covid-19 testing observed across the six WHO regions, the number of new weekly cases increased again in early to mid-March, indicating that the virus is currently circulating at very high level.

Update on Covid-19 status in WHO Eastern Mediterian Region :

- New weekly cases have continued to be declined following a peak reached in early February 2022. Over 50, 000 new weekly cases were reported, with 32% decrease as compared to the previous week.
- Some countries reported a slight increase of cases, for example the occupied Palestinian territories and Tunisia with more than 100% increase of cases, the highest number of deaths is reported by Iran.

- The cumulative number of reported cases in the region was around 21.6 million and 340,000 deaths. Iran is leading with 7.2 million cases, followed by Iraq with 2.3 million in Jordan with around 1.7 million cases reported since the onset of the epidemic, Jordan represents around 8% of the cumulative cases in the Mediterranean region and 4% of the total deaths.

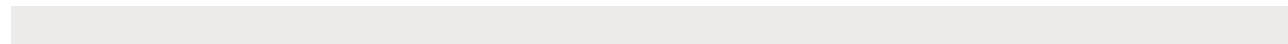
Update on Covid-19 status in Jordan

- During last week from the 19- 25th of March 2022, 3171 new cases were reported, which is greatly lower incidence when compared to the previous weeks with around 30 new cases per 100,000 population per week.
- 28 deaths reported with the total number of deaths so far over 14,031 and fatality rate of 0.8 %,
- The number of people hospitalized because of COVID is 183 as of 5 days ago which is around the 10% over better capacity and much lower than the previous weeks.
- the number of new cases test positivity rate, hospitalization, mortality led to reclassify the community transmission of COVID-19 in Jordan from the stage three into stage two, there is an improvement but we are still in community transmission phase.

Vaccination Status:

- At the global level, there is around 64.4% of the world population that has received at least one dose of COVID-19 vaccine, but only 14.5% of people in low-income countries that have received at least one dose.

In Jordan: The situation is very stagnating over the last few weeks. 43 percent coverage for the total population in terms of two doses of the vaccine and the latest figures indicated around 4.7 million people received at least one dose and 4.4 million received at least two doses, during the last 2-3 weeks there is around 43% coverage which reflect minor uptake.



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 yesterday, 30th of March 2022 on Covid-19 situation and the vaccination status in the refugee camps (Zataari and Azraq and EJC):

Vaccination status at Zataari Camp:

Zataari:

- As of Thursday 30th, March 2022, Zero active cases .
- Total detected cases as of yesterday are 4,223 and 37 death occurred.
- The positivity rate has significantly dropped down over the last few epidemiological weeks, and it was only one as of 30th April, the last epidemiological at week 12, so there has been significant reduction in the number of cases.

Vaccination:

- A total of 33,226 individuals have taken the COVID-19 first dose and out of them 30,053 cases have taken the second dose. So we have also started the administration of the third dose, which is 724 doses have been delivered / administrated so far.
- The positivity has dropped down into one. As of Yesterday, Thursday 30th March 2022 ,in terms of Covid cases the situation is getting better in Azraq Camp with positivity rate 1.9, again it has significantly dropped down from 20 for the last few weeks.
- 23,541 COVID cases have been reported in Azraq and total 23 deaths, and zero active cases as of yesterday.

Vaccination:

- A total of 14,892 doses have been delivered with 13,300, had the second doses and 448 with the third dose.

EJC camp

- Around 16,169 COVID-19 cases have been confirmed with the 1,061 cases have completed their quarantine. Zero active cases in that camp as of yesterday. So, all the camps for the first time had zero active cases.

Vaccination:

- Around 2,643 persons have received the first dose and 2,578 have received the second dose. 93 individuals with the third dose.
- UNHCR will Publish / share the report on the comprehensive situation of vaccination for refugees in and outside the camp in the first two weeks of April 2022.

Dr. Adam / UNHCR provided a short update on the overall of the health program.

- A policy guide has been produced jointly with MoH and the multi donor account members. It's mostly for the health care providers across the Kingdom: Health care providers in hospitals, Primary Health care center. This is in line with the decree of the Prime Minister Office and MoH in terms of inclusion and integration of refugee population in National Health system.

Ibraheem Abu Siam / UNHC responded to Dr. Saverio question on the JRP for 2022 and provided a brief updated on :

- MOPIC is still utilizing the previous plan which has been developed for the year before for 2021-2023. MOPIC utilize the platform and the inputs that received from the humanitarian and development partners using the previous appeal which will not have any impact on the new project newly submitted to the JORISS system but again there is some notes received from the some bartenders that there is a need for to modify the response and this is where the inter sector working group take this discussion forward with MOPIC. .

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

UNFPA/ SRHWG

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

- The SRH SWG circulated an Expression of Interest to serve as the Sector Gender Focal Points (SGFPs) to support the SRH SWG and join the SGFP Network. The deadline for the submission of an Expression of Interest is April 26, 2022, and those interested are requested to submit their interest accordingly.
- Health Services Quality Accelerator Activity Project funded by USAID presented their work plan that was recently endorsed. The areas of focus are 1) Improving the Quality of Equitable RMNCH and 2) Strengthening MOH Leadership and Governance to Lead to Improving Quality Care. The WG discussed areas of collaboration and the inclusion of refugees in the proposed activities.
- International Medical Corps (IMC) presented the findings of the SRH services assessment conducted at Azraq camp. Multiple findings and recommendations were discussed, which will be further addressed in the camp SRH SWG meeting chaired by UNFPA.
- As part of its ongoing efforts to improve the quality and accessibility of the primary health care services it delivers to Palestine refugees, The United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA) presented its scope of SRH work among the full range of the health services provided at the 25 HC run by UNRWA around the Kingdom. UNRWA also focused on achievements resulted from their Family Health Team approach.

UNFPA Update:

- UNFPA’s work with MoH for the year 2022 aims to enhance the COVID-19 vaccine among pregnant and lactating women and show the risks of COVID-19 during pregnancy — including maternal death, stillbirth, and premature delivery — far outweigh the risks of being vaccinated. This will be achieved by producing a poster with a plan to disseminate at all MCH centers.

MHPSS SWG/IMC

MHPSS Sub-working group updates:

- Dr. Ahmad Bawaneh from IMC, provided an update on the MHPSS working group: The MHPSS meeting took place as usual on the third week of March, they emphasized on the national public

health policy, and the need of increase of the awareness for people on how they can access the services.

- Access levels of MHPSS services remain as follow:
 - Urban: refugees in urban can access the MOH facilities at a noninsured Jordanian rate: for Syrians must show up with valid ASC & MOI while for non-Syrian valid ASC. However, a waiver granted expired ASC until June 2022.
 - While Camp: refugees can access the MOH facilities at the foreigner rate only.
- National public health policy: MOH in coordination with UNHCR conducted series of awareness sessions on the recently published policy which is the guidance to ensure better implementation the access policy for refugees at MOH facilities. The awareness sessions were organised for MOH staff , covered North and Middle regions and remained only the south region will resume session by 22nd.
- Regarding refugees, the highest age group adult 18-59 followed 5-17 YRs old, 49.5% Male and %50.5 Female
- Majority of mental health service seekers within NGOs facilities are Syrians80%, Jordanian10%, other nationalities10%
- The highest accumulative number of cases in order are Depression, Anxiety, epilepsy, then other disorders.
- There is a high correlation rate of GBV, Protection and serious MH concerns like self-harm and threatening of suicide were reported among refugees and host population.
- During the past months Cold weather conditions affected accessibility for good number of MH beneficiaries.
- Remote PSS counselling is ongoing for COVID19 patients at the COVID19 CENTER at the camp
- Most common reported barriers to accessing MOH facilities:
 - The user fee approach cannot carry on even the subsidies rate
 - Physical or transportation (remote areas or cost) access
 - Provision of comprehensive package of specialized MHPSS services, including both some pharmacological and nonpharmacological
- Next meeting will take place on the third Wednesday of the next month, which would be on the 20th of April at 11:00 AM.

<p>UNICEF/ Nutrition Working Group</p> <p>NCD-Sub WG</p>	<p>IMC – March 2022</p> <p>IMC Covid Center in Azraq camp and the Isolation center in Zaatari camp has recorded in the month of March 2022 around 148 and 283 confirmed cases with a recovery rate of 98.2% and 98.4% respectively.</p> <ul style="list-style-type: none"> • Isolation Center in Zataaricamp will be closed on the 31st March, as the cases have drastically come down. There was decreasing trends since the beginning of March • So far cumulatively recorded around 2,400 and 4,221 confirmed cases with a recovery rate of 98.9% and 98.7% in Azraq and Zaatari camps respectively. Cumulative Case Fatality Rates were 0.9% (Azraq)and 0.8% (Zaatari) which is comparatively less than the national CFR (1.4%) • Pertaining to Covid Vaccination, under furnished are the achievements: • Complicated cases are referred to MoH hospitals. The number of referrals from Azraq camp Covid center is 49 and that of Zaatari camp is 182 which is 2.0% and 4.3% in Azraq and Zaatari camps respectively. • Teams are on the ground for contact tracing in Zaatari Camp. On an average 200 clients are contacted on a daily basis and are tested. • Community based health teams also monitor the Covid-19 positive patients who are under home care treatment. They provide health education and guide the patients on the case management, explaining the danger signs. • Covid Centre in Zaatari refugee camp is ready, and it can start functioning when the MOH gives the approval. • All other activities will run as usual including the Hospital in Azraq camp, PHCs, 24/7 ERs in both the camps during the holy month of Ramadan. <p>NA</p> <p>NA</p>
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Medair/CHPF

CHP

Ms. Amira Ameen provided an update on the CHF and Medair:

- The CHPF meeting was held in Tuesday 1st of March 2022
- The community health partners approved the TOR of CHPF.
- The 4Ws document were reviewed, and all community health partners were encouraged to keep this document up to date to have a clear picture of the community health activities for 2022
- The main discussion of the CH task force is the latest update from the MOH and all partners about the community health activities
- Our colleagues from IMC did a presentation for IMC relax mobile application for tele MHPSS
- CHP are still looking for a new partner to be a co-chair for the CHPF to replace our IRC colleagues, so if any partner is interested to nominate themselves, please send an email to Chair of the CHPF (Ameera Amin- amira.ameen@medair.org)

Medair:

- Continue working on the same activities for cash for health project in Amman, Irbid, Mafraq ,Zarqa , Balqa'a ,Madaba, Jerash and Ajloun under the AA,ECHO,AND BPRM grant.
- Amira extended her thanks to all colleagues from WHO, UNHCR, and other NGOs who responded to Medair's call for key informative interviews with the research consultants who are working on Medair's research about Exploring the viability and effectiveness of alternative transitional financing systems for the provision of essential health care services among refugees in Jordan, it's really highly appreciated.

SGFPN

Samira the Gender Focal Point and from IACU and Yara from Caritas and the SGFP representative of the Health sector presented the Sector Gender Monitoring Dashboard Q4 (SGMD)and provided an update on the network TOR and Workplan:

- The SGMD Gender Monitoring Dashboard(SGMD) is a monitoring tool that provides evidence on to what extent Health Sector benefits equally women, girls, boys, and men [WGBM] refugees under humanitarian programming.
- It has been developed based on available data / information shared by partners on ActivityInfo and other useful resources as: Regional Indicator report, Gender and Age Maps, ISWG and COVID-19 Refugee Response monthly updates, Sector Work Plan, etc.
- Data is analysed using several M&E tools: GAM, Availability, Accessibility, Acceptability, and Quality, the Age, Gender and Diversity (AGDs) reflecting differences that may exist between the sexes, clarifications, and thus formulate appropriate recommendations.

With the dashboard information and recommendations, we can refine gender lenses with sector annual planning reflected into work plan for 2022.

Introduction on SGFPN:

Sector Gender Focal Points Network (SGFPN) was established in 2013 under IACU/ UNHCR with the focus on contributing and ensuring the implementation of a gender-responsive humanitarian response. SGFPN provide Inter-Agency coordination, cross-sectoral technical support, and guidance to ensure the integration of gender aspects from an intersectional perspective in the humanitarian response in Jordan.

Summarized TOR of SGFP

- Regularly attending the meetings, raising awareness on, and providing updates on key gender issues in the sector.
- Participating in the development, implementation, and monitoring of the SGFPN annual work plan
- Sharing resources & outcomes within health sector/organizations
- Identify sector gender capacity needs, support the organization and delivery of relevant capacity building and training sessions for sector member organizations on gender tools
- Provide quarterly dashboard on gender within the respective sector, utilizing data available on the ActivityInfo platform.

5. Partners updates urban

<p>Partners updates [Urban]</p> <p>Caritas</p> <p>SAMS</p> <p>HI</p>	<ul style="list-style-type: none"> • Caritas has continued to provide PHC services for registered refugees and vulnerable Jordanians, were in Feb Caritas provided 5512 PHC services and NCD medications have been dispensed of 3 months stock for controlled patients and one month stock for uncontrolled patient for frequent follow up where 2308 patients have been provided with NCD medication and medical follow ups" <p>Ms. Aseel provide an update on behalf of SAMS:</p> <ul style="list-style-type: none"> • SAMS continue implementing services in the wadi elsier clinic for Rehabilitation, Physiotherapy and MHPSS , in Wadi AL Seir medical center /Ministry of Health , the working days 6 days for Physiotherapy and 1 days for mental health support • MHPSS program SAMS completed the capacity building activities for MoH and MoSD staff in mental health and psychosocial support topics • MHPSS team continued providing Safeguarding trainings for CBOs and now SAMS is signing an MOUs with them to start develop a unified policy for safeguarding and GBV management • SAMS continues providing basic services ,community and family support, Child protection ,non-specialized support, and Specialized services. • SAMS is planning to increase Adolescent resilience activities since SAMS will support healthy emotional development for youth • For Medical Mission SAMS is preparing for the next mission and peer to peer support that will be conducted in June .All details will be shared with sector members once completed • SAMS will continue providing other specialized services for kidney transplant patients , also for retinopathy patients SAMS will continue the follow up for those patients • SAMS has donated artificial prosthetic limbs to the Ministry of health <p>HI Update: Mr. Hamzeh provide an update on behalf of HI:</p> <ul style="list-style-type: none"> • The Rehabilitation project, Under the patronage of HRH Prince Mired Bin Raad and the Minister of Ministry of Health are honored to open a Rehabilitation Department in Primary Health Center
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	<p>(PHC) AL-Qwismeh, which is the first time to start providing rehabilitation services at PHC level in Jordan. This activity is moving forward in line with the National Rehabilitation Strategy (MoH Jordan).</p> <ul style="list-style-type: none"> • HI planning to conduct National Rehabilitation platform workshop in May 2022 with all the rehabilitation actors in Jordan. • 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. • HI continue with MoH implementation of the DDH and CP guidelines.
<p>Islamic Relief Jordan</p>	<p>Ms. Dania provided brief on IRJ activities:</p> <ul style="list-style-type: none"> • Islamic Relief Jordan during March 2022, served a round 1400 patients through mobile clinic in both South and North Jordan. • Conducted 40 Surgery , 20 of them with PCRf second Mission,10 Haemodialysis sessions and eight awareness session for 200 beneficiaries about first aid. • During April 2022 they will continue their work through the mobile clinic , surgeries, and Haemodialysis
<p>CDE</p>	<p>Dr. Ala’aa provided an update on behalf of CDE:</p> <p>CDE updates</p>
<p>HoM HumaniTerra – Jordan</p>	<ul style="list-style-type: none"> • Orthopedic surgical mission for Lower limbs deformities by international surgeons in May/2022. • Orthopedic surgical mission for upper limbs deformities by international surgeons in Jun/2022. • Cardiac surgical mission by local cardiac surgeon in Jun/2022. • PSS activities will be held during the surgical missions and will be applied to the children and their caregivers. • Early Detection campaign in Jerash during May/2021 to detect Orthopedic anomalies such as (DDH and Clubfoot) and Cardiac anomalies for new-borns less than 6 months.

	<ul style="list-style-type: none"> • Early Detection campaign in Amman during May/2021 to detect Orthopedic anomalies such as (DDH and Clubfoot) and Cardiac anomalies for new-borns less than 6 months. • CDE provides capacity building activities for medical and non-medical concerned staff, to raise the awareness about the early detection in general and about the cardiac and orthopedic anomalies.
<p>MSF</p>	<ul style="list-style-type: none"> • NA
<p>RAHS</p>	<ul style="list-style-type: none"> • NA
<p>Qatari Red Crescent(QRC)</p>	<ul style="list-style-type: none"> • NA
<p>Health Apeal Society</p>	<ul style="list-style-type: none"> • NA
<p>AMR</p>	<ul style="list-style-type: none"> • NA
<p>ICRC</p>	<ul style="list-style-type: none"> • NA
<p>EMPHNET</p>	<ul style="list-style-type: none"> • NA
<p>IOCC</p>	<ul style="list-style-type: none"> • NA
<p>CVT</p>	<p>Ms. Hadeel provided an update on behalf of CVT</p> <ul style="list-style-type: none"> • The Center for Victims of Torture (CVT) is excited to share with you that because of the growth in services, we moved to a new location in Amman, as it has become necessary to accommodate our growth to serve more people. Effective the 1st of April 2022. All CVT activities will be resumed as normal. The last working day in the old office was Thursday, March 31st, 2022.

	<ul style="list-style-type: none"> • The new address: Building 5, Anabtawi street, Ministry of industry and commerce traffic lights, Abdali, Amman. • Please note there will be no changes in CVT referrals contact information.
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6. AOB	
Action Points	<ul style="list-style-type: none"> • Partners to fill in the mapping exercise template by 10th of April COB • UNHCR to Share the report on the comprehensive vaccination situation for refugees in and outside the camp. • UNHCR to share partners the policy guide on the inclusion and integration of refugee population in National Health system and Access to the health services.
Next Monthly Meeting	Thursday, 28 of April 2022 from 11:00 to 1:00