Weekly Report Public Health and Nutrition Jordan Week 30 HIS Report Date August 3rd 2013

1. Operational Highlights and Situation update

- Preparations continue across all sectors in the development of the Azraq in advance of the opening that is scheduled for 1st September. A Joint Operations Centre (JOC) is being organised for Azraq in support of emergency communication by all UN and NGO agencies. Radios are being procured and will be distributed to all agencies working in the camp.
- IFRC have formally accepted the donation of the hospital for Azraq Camp from the Italian Government. The 130-bed capacity structure will be completed mid-to-late October. As an interim measure an emergency tented field hospital (40 in-patient bed capacity) will be installed mid-to-late August with surgical and laboratory services. A 12-month agreement is planned between IFRC and the Jordanian Red Crescent Society (JRCS) for the provision of two ambulances and five drivers for referrals out-of-the-camp.
- MSF Holland have received approval from MoH and MOPIC for a project supporting Ramtha Hospital which until recently was receiving an approximate average of 30 war injured from the border each day. This will take place in a renovated ward and operating theatre adjacent to the Emergency room and will focus on abdominal, chest and orthopedic injuries.
- Amman Health Directorate is now doing mobile vaccination to a number of tented sites of Syrians in South Amman. This followed a UNHCR assessment several weeks ago which identified low vaccination coverage.

2. Population

Total Syrian persons of concern in Jordan is 502,060 with 438,230 registered and 66,014 awaiting registration. New arrivals numbers continue to be low with only 923 new arrivals registered between 24th and 31st of July.

Total active Syrians registered with UNHCR in Jordan	306,457
Number of Syrians waiting to be registered with UNHCR	63,830
Number of persons collecting WFP ration in Zaatri*	117,737
Number residing in Emirati Jordanian Camp as of July 28th	3,816
Number of new arrivals from 24th to the 31st July	923

3. Coordination and Assessments

- Irbid health coordination meeting held on the 30th July chaired by the Directorate of Health. Main outcomes: lessons learnt from recent campaign will be applied to planned national campaign to ensure as high coverage as possible. UNHCR to share the contact information of JHAS MoH hospital focal points in Irbid with the Directorate of Health.
- Amman-level Health Coordination meeting held on the 1st of August. Main outcomes: WHO will hold a meeting shortly to demonstrate the database of MoH facilities and how this can be used; EWARN/HIS needs to be introduced in interested NGO facilities out of camps based on the revised MoH EWARN; UNHCR/WHO to follow up with MoH regarding diarrhoeal diseases preparedness out-of-camp.
- JHAS outreach team conducted a two-week rapid participatory assessment amongst Syrians living in informal settlements and houses of Syrian refugees in east Mafraq. Main findings: 275 families were interviewed with a total number of 1901 individuals; households contained mixed family groups with an average size of 6.9; financial difficulties were very common; refugees living in houses were in debt for at least four months (the average rent was 150 JD) though most households were living in tents; 18% of households were femaleheaded; the vast majority of children weren't attending school; most refugees were unaware of available health services for refugees not holding UNHCR registration (full report attached).

4. New arrivals

- UNHCR, IOM, JHAS and IMC undertook assessment of Raba Sarhan to finalize site layout of health and vaccination reception areas. IOM will do screening, triage and new arrivals vaccination while JHAS will assess cases categorized as "Red" and evacuate if needed.
- IOM conducts new arrival vaccination in Zaatri and EJC camp supported by MoH, UNHCR and UNICEF. From 24 July 2013 to 30 July 2013 IOM medical team vaccinated 196 refugees against polio, 735 against measles and 180 were provided with Vitamin A. From 24 to 30 July 2013 IOM medical team provided health checks for upon arrival to Za'atri camp for 975 refugees; 22 persons with medical conditions requiring immediate referral or treatment were referred to health agencies within Zaatri.

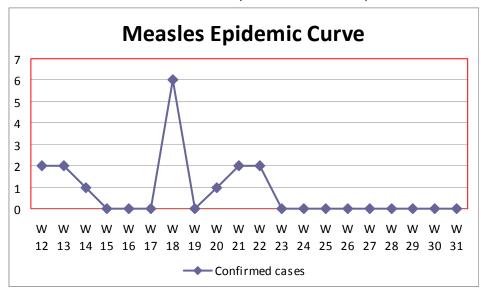
5. Health services

- Concerning healthcare services in Azraq three major areas of preparation have been focused upon: a) infrastructure development of health facilities, b) acquisition of ambulances for emergency referrals c) recruitment of healthcare staff.
- In Azraq IMC has undertaken a service agreement with Jordan Red Crescent Society for two ambulances and drivers until end of 2013. Site preparation of

- the health post in Village 3 continues progressing. Caravans for the health post and the health clinic, sited in Village 6, have been acquired and are awaiting installation on-site in the camp.
- During the past week, 267 children under five years old visited the eight Oral Rehydration Therapy (ORT) corners established in Za'atari; 5 were referred to health facilities and Diarrheal Treatment Units (DTUs) for further assessment.

6. Communicable diseases and outbreak prone diseases

- Number of cases of acute jaundice syndrome in Zaatri reducing; hygiene promotion will continue with more emphasis on cleaning of jerry cans and food safety
- Of 65 stool samples collected in Zaatri 18 have been positive for shigella flexneri; incidence rate of bloody diarrhea cases stable
- No new measles cases in Zaatri; total stands at 16; surveillance continues



7. Tuberculosis

- From 24 to 30 July 2013 the UNHCR supported IOM medical team screened 996 refugees for TB; 2 new pulmonary TB cases were diagnosed and started treatment.
- The total number of TB cases diagnosed to date is 73; 52 pulmonary TB including 3 MDR cases and 21 extrapulmonary. 17 cases have completed their treatment successfully; 12 Pulmonary and 5 Extra pulmonary.

8. Reproductive health

- Provision of RH services continues in Zaatari, with an average of 110 services per day in UNFPA/JHAS clinics.
- There are now two sites doing deliveries in Zaatri with GSF and JHAS (JHAS clinic in the Comprehensive Women and Girls center (Z3)). Since June 20, 61 deliveries were made in the JHAS clinic in Z3. Further discussions will take place between GSF and JHAS on the division of the deliveries workload between the two sites and on the referral procedures.
- A new site, (the fourth comprehensive women's center in Zaatri) currently being opened in the newer part of the camp in Z4. This will include another JHAS RH clinic (in addition to women's safe space and youth friendly space) similar to the Z3 model.
- UNFPA will be delivering two ambulances to MOH initial plan was one for Zaatri and one for Azraq, to support the referral of RH-related cases and deliveries. Expected to be delivered to MOH after the Eid.
- IMC will start arrangements for the provision of RH services along with GBV services with UNFPA support in Azraq camp. Plans to start operating from 1 September in a phased approach. Workplan and LOU between UNFPA and IMC finalized and expected to be signed soon.
- In EJC the Emirati Red Crescent has contacted UNFPA for possible areas of cooperation in EJC, given an identified gap in RH awareness and counseling. Several visits and discussions took place with ERC, IOM, and IFH. Agreed that IFH with UNFPA support will start RH counseling in EJC after the Eid, a rapid assessment will be conducted prior to this to identify women's RH and GBV related concerns.

9. Nutrition

• During the past week, 536 mothers and 487 children under five visited the four UNICEF/Save the Children Jordan (SCJ) Infant and Young Child Feeding (IYCF) caravans in Za'atari and EJC camps. In addition, 1,519 children under five and lactating mothers received nutritional snacks.

10. Secondary and tertiary care

- Islamic Relief Worldwide have received 500,000 USD from Opec Fund for International Development for secondary and tertiary care for Syrians. IRW will use the same networks and referral facilities as UNHCR to facilitate cross referral and case management.
- Exceptional Care Committee held on 24th July; 198 high cost cases reviewed; 173 have been approved, 18 pending and 7 denied. 126 (79 emergencies) Syrian cases, 61 (23 emergencies) Iraqis and 11 others. Total approved amount was 338,000 JDs, 71,000 covered by WHO for Iraqi cases and 267,000 JDs covered by UNHCR. The most prevalent conditions were cardiovascular disorders, perinatal conditions and renal diseases.

• Qatari Red Crescent will soon launch their project for war wounded and other secondary and tertiary care cases. QRC will take over 20 renal failure cases in Zatari (currently covered by UNHCR) retroactively from 1st July till the end of year, they also have some budget for congenital heart disease so a number of cases will be referred to QRC through UNHCR referral system to be evaluated then to be operated.