



REFUGEE POPULATION IN JORDAN

578,551

800,000

Registered Refugees as of 1 March 2014

RRP6 Refugee Planning Figure

FEBRUARY HIGHLIGHTS

Polio update: at the end of February, the total of polio cases reported in Syria since the outbreak in 2013 was 24. Preparations are ongoing for the national polio vaccination campaign in Jordan planned for 2–6 March.

Mafraq coordination: At the Mafraq health coordination meeting held on 5 February, improvement reported on referrals between Zaatari camp and Mafraq hospitals. Cisco Clinic Telemedicine facilities at Mafraq Hospital can be extended to refugees, and an increase in cases of scabies and lice was reported by both the Emirati hospital and Islamic clinic.

MHPSS sub-working group meeting held on 19 February at the Ministry of Health; IMC and WHO presented main findings and recommendations of a Mental Health Assessment conducted in Amman, Ramtha, Irbid, Mafraq and Zaatari camp.

Irbid consultations: Irbid Ministry of Health facilities provided 15,031 consultations in their primary health centres to Syrians in February and 4,271 in hospitals.

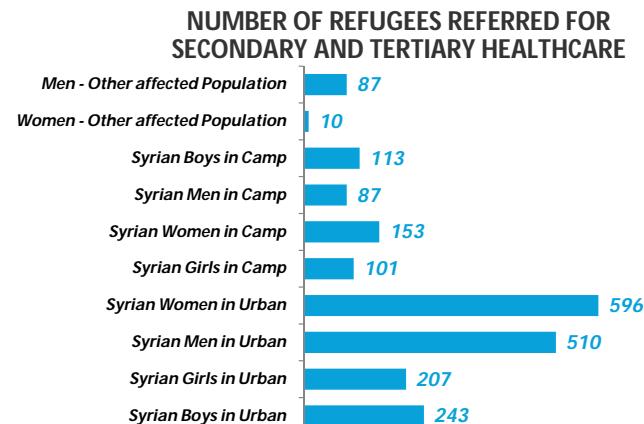
Trainings:

* A four-day Integrated Management Childhood Illnesses (IMCI) training took place in Zaatari camp from 3–6 February, supported by UNICEF. Seven doctors (four from JHAS, three from MdM clinic and one from Saudi clinic) were trained. The training, which took place in two clinics in the camp (JHAS and MdM), included theoretical training, video sessions and clinical sessions with patients.

* A three-day workshop on infant and young child feeding (IYCF) was conducted from 2–5 February by Save the Children Jordan, under direct supervision of MoH/UNICEF, attended by 12 midwives working at MoH clinics in Amman.

Non-Communicable Diseases (NCD) Task Force: The newly formed task force met three times in February. The task force was formed to support MoH in increasing the response capacity for NCDs, and for actors to share experiences and consolidate NCD interventions. A draft Terms of Reference and general agreement for the group has been developed. Under discussion are support to MoH in reviewing existing national guidelines on NCDs, definition of priority NCDs and treatment protocols.

New arrivals triage: IOM developed a pilot for a triage tracking process in Raba Sarhan with the purpose of securing patients' timely access to services when arriving at camps.

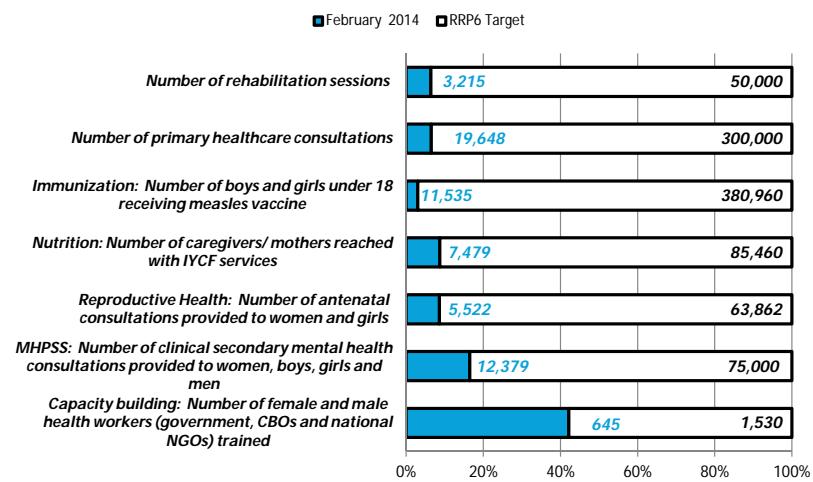


NEEDS ANALYSIS

With increasing numbers of Syrian refugees entering Jordan and the clearing of the registration backlog, demand on the public sector as well as NGO-supported clinics continues to grow. While demand for acute care is high, management of chronic non-communicable diseases (NCDs) and demand for prevention services is weak.

The Syrian refugee health profile is that of a country in transition with a high burden of NCDs; in 2013 NCDs accounted for 17% of clinic visits in Jordan. The main causes of morbidity were cardiovascular diseases (38% of visits), diabetes (24%), and lung diseases (14%). However, consultations for acute illness was the main reason for seeking care accounting for 73% of clinic visits (27% of visits were by children <5 years). Communicable diseases also remain a public health concern with a measles outbreak in Jordan in 2013 and a polio outbreak in Syria. Of concern is the low routine immunization coverage amongst refugees. Preliminary analysis of IMC's Assessment of Health Care Access in out-of-camp refugees indicates a gap in the provision of reproductive health services with health facilities being overwhelmed and overcrowded. Refugees reported seeking reproductive healthcare only in case of emergency needs and for delivery itself. Ministry of Health facilities continue to bear most of the burden with 15,815 health services provided to Syrians in public health centers in January 2014 in Irbid Governorate alone. A June 2013 assessment found 9% of all consultations in MoH facilities in five northern governorates and Zarqa to be amongst Syrians.

PROGRESS AGAINST TARGETS



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