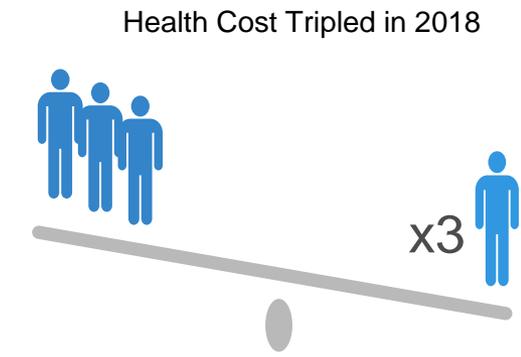
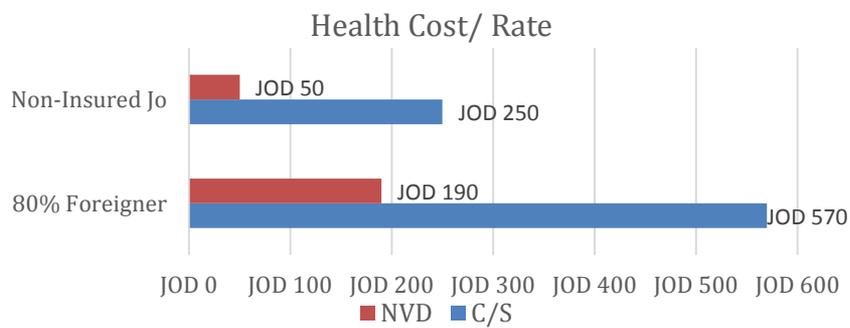
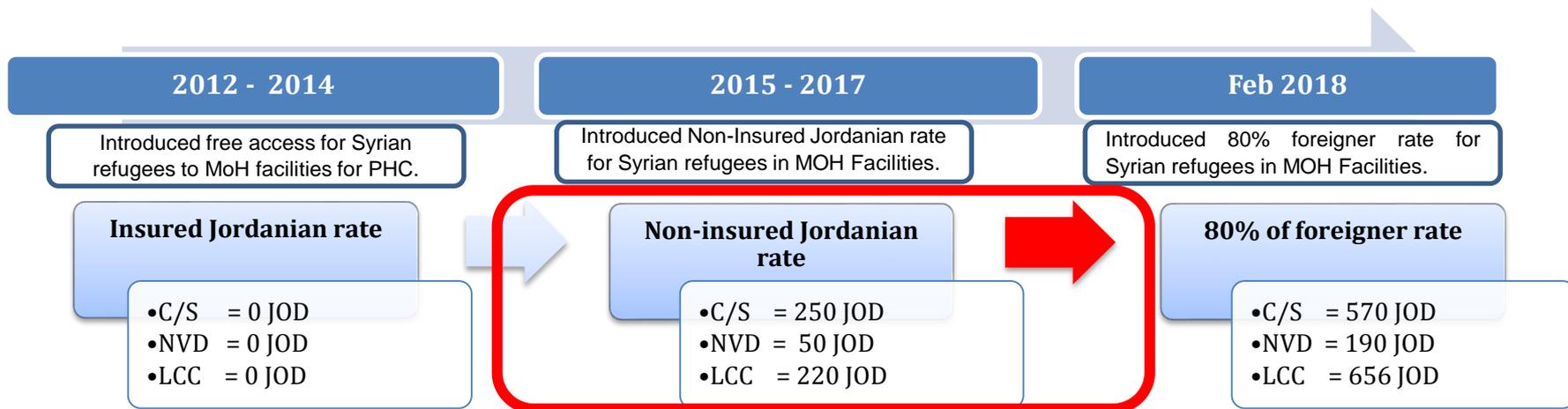


HPF Meeting- 25th June 18





Challenges in the Health Sector 2018





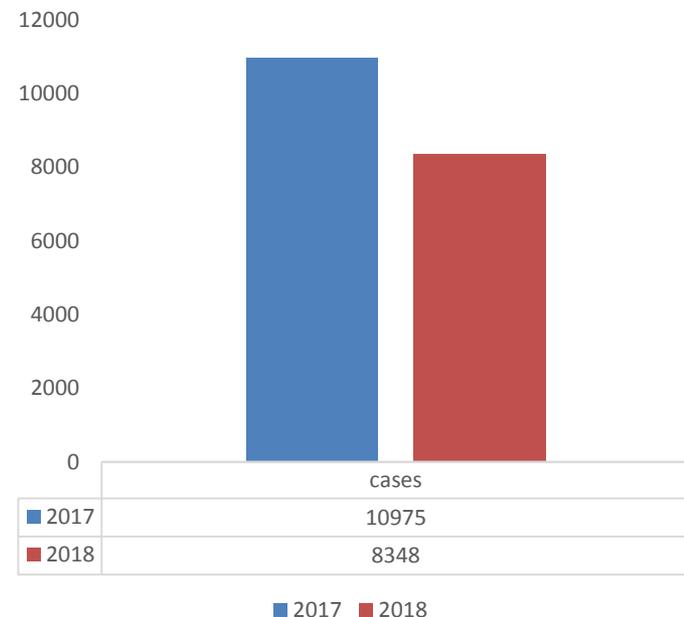
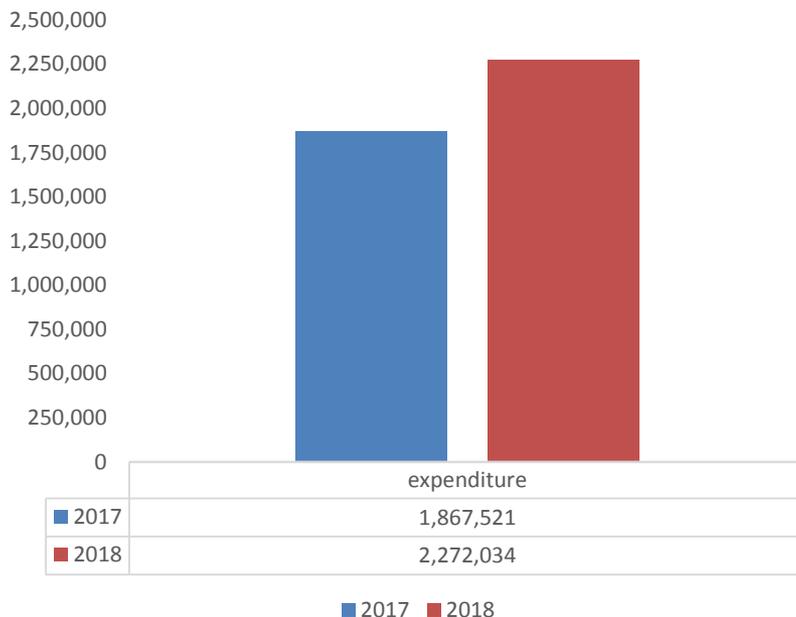
Impact on Refugees access to Health services



The new rates are unaffordable, limiting access to essential health care services (regardless of Vulnerability)

Referral costs increased by 20% while cases served decreased by 30% - Jan-May

\$170 average in 2017 to \$272 in 2018 with new health rates

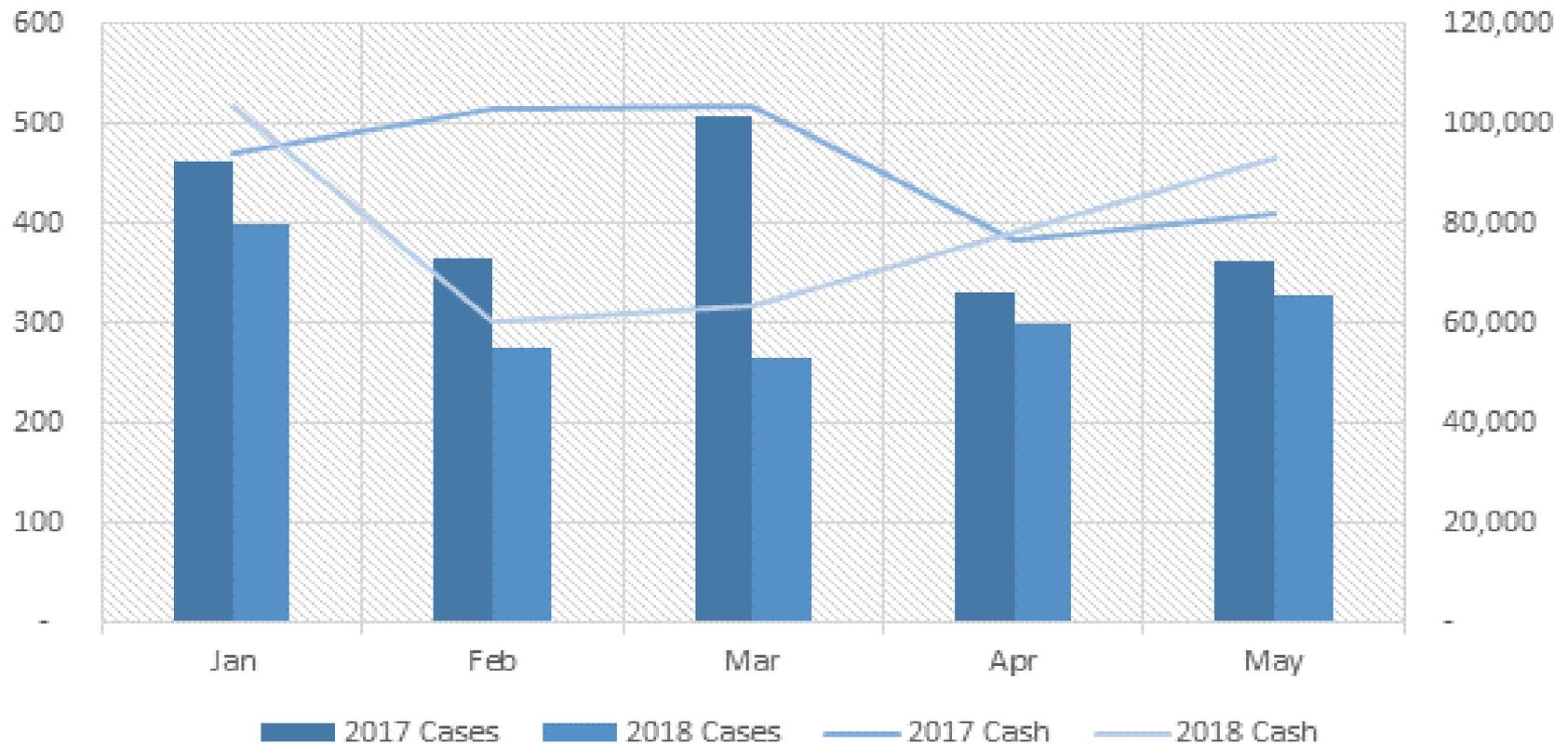




Impact on Refugees access to Health services



Comparison Cases # / Cost 2017/2018





Impact on health access for refugees



- Cut of UNHCR Cash for Health Services Project
 - Not cost-effective (previous saving \$200,000 per month)
 - Private affiliated hospital network.
- Increased waiting list for Elective cold cases (Cardiac, Cancer, Elective Surgeries)
- A total of 1,700 cases approved by UNHCR Exceptional Care Committee but services were not provided due to gap in funding(JOD 1,7 ml)
- Prioritization for Camps Health Services vs Urban Health Services coverage
- Overloading of camp health care services (Seeking free health care and Medications)



Funding

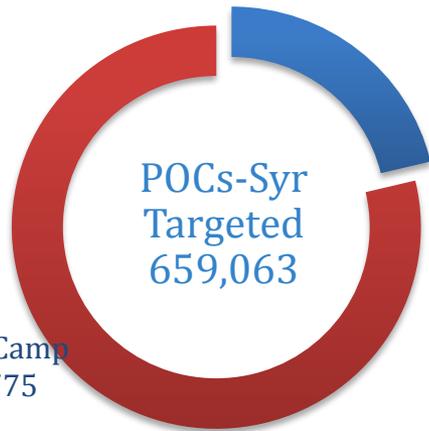


\$168 million requirements for Health in the Jordan Response Plan currently

- \$78.6 million for humanitarian partners - \$12 million received Jan-Mar
- 14 partners in the Health Sector – 40% UNHCR requirements
- Partners Pulling out/downscaling in Health Sector (MSF-F Irbid, IRC Zaatari, EJC Mafraq)
- War wounded are not covered by any partner due to shortage in funding
- Shortage in funding for UN sister agencies (Paediatric ward in IMC hospital funded by Unicef)

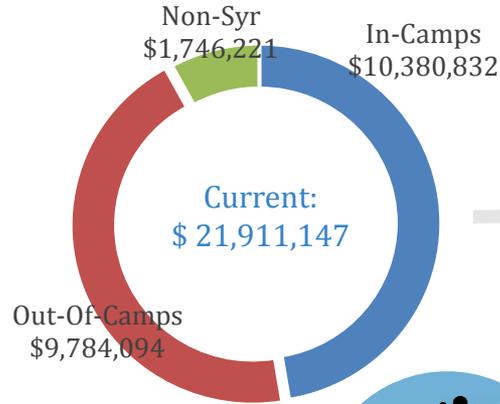


NEEDS, TARGETTED & REQUIRMENTS



In-Camps
140,288

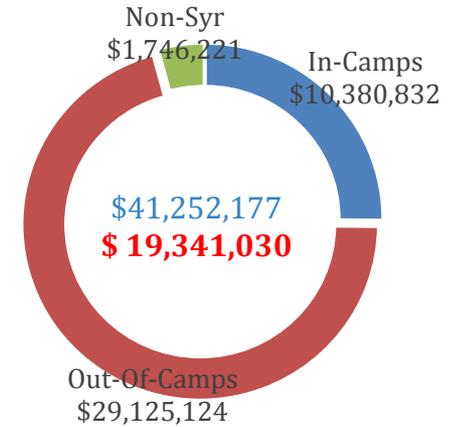
Out-of-Camp
518,775



Non-Syr
\$1,746,221

In-Camps
\$10,380,832

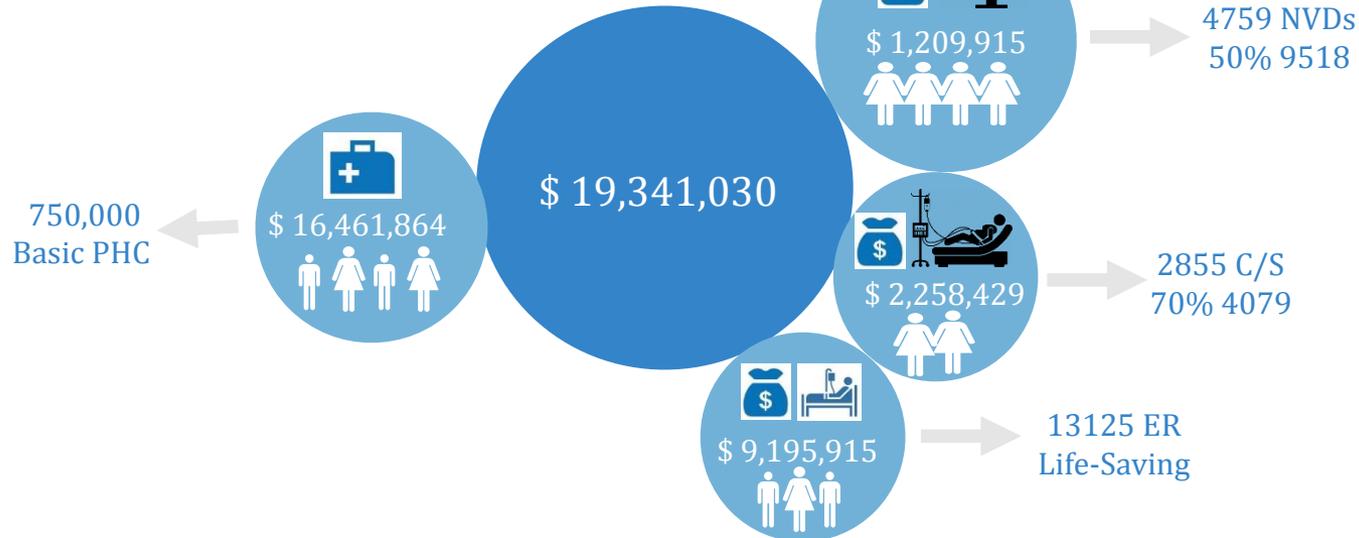
Out-Of-Camps
\$9,784,094



Non-Syr
\$1,746,221

In-Camps
\$10,380,832

Out-Of-Camps
\$29,125,124





Key Messages



- Request to reverse the current health policy ad interim until the end of the year. This will allow the set up of the Health Pooled Fund.
- Money in the pooled fund through the Multi Donor Account needs to be sufficient to ensure that refugees are streamlined into national services.
- WB estimated the cost for Syrian to access public health system USD 26.7 M per annum
- Continue the advocacy efforts with key stakeholders(GoJ and donors) to maintain the integration of refugee populations into national health system

Questions?

