

# Health Sector Jordan

## Bi-weekly Report

March 17<sup>th</sup> 2014



### Population data

Total active Syrians registered with UNHCR in Jordan (as of 16th March 2014)	588,545
Number of Syrians waiting to be registered with UNHCR	0
Number of persons collecting WFP rations in Zaatari*	99,850
Number of Syrians registered in Emirati Jordanian Camp (as of 16th March 2014)	3,818
Number of new arrivals between 8th and 14th of March	2,184

\* As of second distribution cycle in February 2014

### Operational highlights and situation updates

- The total number of laboratory confirmed wild poliovirus type 1 cases (WPV1) reported by the government of the Syrian Arab Republic is 25 with advance notice of an additional WPV1 case from Hama province in a 30-months old, unvaccinated child who had onset of paralysis on 21 January 2014.
- MoH/UNICEF/WHO/UNHCR and partners implemented third round of national Polio vaccination from 2nd – 9th March in camps and outside the camps
- Training in SGBV and child protection SOPs for health actors took place in Irbid on the 10th -11th March in IMC Office in Irbid.
- Azraq camp is scheduled to open on the 30<sup>th</sup> of April

### New arrivals

- From 18 to 28 February, IOM medical team provided health checks for 5374 Syrian refugees upon arrival at Zaatari camp (47 percent male, 43 percent female). Patients with conditions requiring immediate services or treatment represented 1.5 percent; 885 patients were yellow case (non-urgent medical conditions). Approximately 42 percent of the screened conditions during the reporting period were acute conditions.
- From 18 to 28 February, IOM medical team vaccinated 1,707 refugees against polio, 2,342 against measles and provided Vitamin A supplement to 738 refugees.

## Coordination and assessments

**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. Reported mental health problems were distress, fear, anger, disinterest, hopelessness, sadness, excessive nervousness and social isolation; a need for counseling was reported by 13.3 percent of respondents, and 18.8 percent felt a difficulty or inability to carry out essential daily living activities because of feelings of fear, anger, fatigue, disinterest, hopelessness or distress. Nearly half of the respondents reported a coping strategy of “doing nothing” (41 percent). Main recommendations included advocacy for MHPSS programming; early detection and screening of MHPSS conditions; strengthening outreach, community awareness and referrals for MHPSS, and incorporating MHPSS considerations in multi-sectoral planning and programming especially in health, protection, and education sectors.

- **Community Health Task Force** third meeting held on 19th February chaired by IFRC at JRC premises. **Main outcomes:** IEC material matrix will be developed by UNHCR and shared with CHTG to be compiled prior to the upcoming meeting; this will include hygiene promotion material; CHTG representative will attend NCD TF meetings to ensure linkage between both working groups.
- **Non-Communicable Diseases Task Force** met on the 24<sup>th</sup> of February chaired by MoH and WHO. **Main Outcomes:** MOH will present National Hypertension Guidelines for the next Task Force meeting. IMC and MdM France will present NCD diagnostics (including minimum laboratory investigations and equipments list); UNHCR shared a draft essential NCDs medicine list for feedback
- **Reproductive Health sub-working group** meeting held in Amman on 26th February.
- **National Health Sector Coordination** meeting held on the 27<sup>th</sup> February in Amman and chaired by UNHCR and WHO. **Main outcomes:** near final draft sector ToRs were shared and will be circulated for feedback; indicator on primary health care consultations will be added to the health sector dashboard. One major and ongoing gap is post operative/convalescent care for the war wounded. There will be a follow up meeting on this is a need for meeting of all partners working with war wounded to find a solution
- **Health Sector Strategic Advisory Group** (UNHCR, WHO, IMC, MdM, Handicap International, UNICEF, UNFPA and USAID) met on the 11<sup>th</sup> of March. **Main outcomes:** 1. Draft Guidelines on Research in Refugees will be developed to guide those wishing to undertake research (these will includes sectoral clearance, national and international ethical review clearance and guiding principles). 2. List of research gaps relating to health in Syrian refugees will be developed. 3. Need to provide more stringent guidance for the media on their handling of persons with medical problems and disability as some media interventions have been inappropriate.

## Health Services

### Zaatri camp

- Work continues on the new Qatari clinic in District 8. The clinic will start operating beginning of April.
- MSF-Holland will start services in the former MSF-France compound in Zaatari. They will provide post operative recovery and convalescent services for war wounded. Most of the cases will be referred from their facility in Ramtha but they will be able to receive cases arriving in Zaatari from other hospitals if beds are available. For the majority of February bed occupancy in MSF's facility in Ramtha has been in excess of 100%. Due to the severity of the injury, average stay duration in excess of three weeks has led to bed blocking. By opening 20 beds in Zaatari, transferring post-op patients from Ramtha and providing nursing care MSF aims to retain the effectiveness of Ramtha as a front line surgical hospital with the capacity to receive mass casualties. Additionally, if wounded refugees arrive in Zaatari following discharge from other medical facilities and they are considered too vulnerable to stay in the open camp setting, they will aim to offer space and care for them.

### Azraq

- Preparations continue for Azraq camp. IMC clinic in Village 3 is complete and most staff are already hired and carrying out other duties in the urban setting; drugs and equipment have been procured. IFRC Health Coordinator has arrived; IFRC hospital will not open until the camp has begun accepting refugees and will open in a phased approach. IFRC is currently finalising agreements with Jordan Red Crescent for two ambulances and agreements regarding recruitment of local staff.

### Urban

- During EPI weeks 9 and 10 IMC Mobile clinic as visited Karama and Safout in Salt, Thnaibeh and Ramtha in Irbid, Ein Bani Hassan, Manshyeh and Mafraq City in Mafraq, and Awajan and Zarqa City in Zarqa 1,245 consultations were provided of which 63% were female and 37% were male. 51% were Jordanian, 48% were Syrian, and 1% were other nationalities. All of the Syrians seen had UNHCR registration. 18% were under 5 years old and 7% were 60 years of age or above. The majority of patients were new with 146 revisits from total consultations. The top five morbidities (aside from "other") seen were URTIs (44% of the case load), LRTIs (10%), Vaginitis (8%), UTIs (4%), Hypertension (3%).
- ICRC have stopped their surgical support to Mafraq Hospital due to the low numbers of war wounded sent there. They will continue to support and expand medical support closer to the border
- Irbid Ministry of Health primary health care facilities provided 15301 consultations in February to Syrians and hospitals provided 4271 consultations; this is similar to the January numbers

## Immunization

- MoH/UNICEF/WHO/UNHCR and partners implemented third round of national Polio vaccination from 2nd – 9th March in camps and outside the camps the summary is as follows:

- Za'atari Camp from 2nd - 6th March 2014: 18,864 children aged 0-5 years received two drops of oral polio vaccine. 3 districts were covered per day with 10 teams each district from IRD Community Health Volunteers. Each team 4 members (1 tallyer and finger marker, 1 sprayer for tent/caravan, 1 vaccinator, 1 team leader). IOM did mopping up and had teams on the market road (30 team members). Finger marking, coupons, and spraying used to prove the vaccination status. Rapid convenience monitoring carried out by Save the Children International and Save the Children Jordan (2 teams each team of two members). Administrative coverage is 98.4%. EMPHNET conducted post campaign survey and coverage is awaited.
- Out of camp polio vaccination from 2nd -9th March 2014: The total number of 0-5 years children who received two drops of Oral Polio Vaccine was 1,065,912 including 138,911 Syrian children. Administrative coverage for Syrian refugees was 83%. Coverage survey awaited.
- In total 1,084,776 children 0-5 years including 157,775 Syrian children in camps and host community have been reached with two drops of oral polio vaccine during the third round of Polio NIDs in Jordan
- In Zaatri camp a 5th routine EPI team has been established at JHAS/UNFPA clinic in addition to the four already existing. The aim is to increase routine EPI coverage for children and women of child bearing age.
- A IOM mobile vaccination team continued at the UNHCR verification during the month of February. During this verification exercise, all women of childbearing age (15 - 49 years old) and children under 5 years old received required routine vaccines doses based on their immunization status. As a result 622 children received BCG vaccine and 565 children were fully immunized during February. In addition to that 551 pregnant mother and 1,100 non-pregnant women receive the required doses of TT vaccine.

## Tuberculosis

- From 18th to 28th February, IOM medical team delivered TB awareness sessions for 3,935 refugees and members from the host community, and screened 6,377 refugees for TB. During the same period, two new TB case were detected (one pulmonary and one extrapulmonary). As of 28 February 2014, the total number of TB cases reported since March 2012 is 101 (71 pulmonary – including 3 MDR – and 30 extrapulmonary).

## Reproductive Health

- Training in SGBV and child protection SOPs for health actors took place in Irbid on the 10th -11th March in IMC Office in Irbid. Total number of participants 16 ( 12F-4M) from different organizations ( 4 IFH/NHF, 3 MoH, 1 JHAS, 1 JWA, 2 NGOs district, 5 IMC). The aim is to related understand the purpose and importance of the SOPs , specifically for the participants to gain

knowledge and skills as a health providers on: the principles of working with survivors of GBV and children at harm, identification and referral of cases as per the SOPs.

- 118 newborn baby health kits and 119 mother kits were distributed by UNICEF to the new born babies and mothers at their discharge from the delivery rooms in Za'atari camp during February 2014.
- UNFPA/JHAS Zaatari clinic is delivering around 25 non-complicated cases a week, and referring around 25 complicated cases inside and outside the camp.

## Nutrition

- JHAS provided simplified Community-based Management for Acute Malnutrition operational guidelines to nutrition officers, nurses and GPs, in addition to laminated field cards in A3 paper size to be hung in triage, examination room and food distribution areas.
- A regional IYCF consultant has been recruited by UNICEF, and will be based at Save the Children Jordan. The consultant will provide technical assistance, evaluate IYCF programmes in Jordan and IYCF interventions in the region.
- In February, of the 955 pregnant women screened by JHAS in Zaatari, 56 were diagnosed with moderate anaemia and prescribed 120 mg of iron plus 400 ug of folic acid/ 3 months.
- Implementation of the WFP treatment of moderate acute malnutrition programme (MAM) began in Zaatari through Save the Children Jordan. MUAC screening took place from 3–19 February, covering 13,009 children under five (1.2%) and 1329 pregnant and lactating women (PLWs). MAM cases found: 164 in children under five, and 28 in PLWs (2.1%). After an enrolment period of three days, the first distribution of SuperCereal Plus took place at the NRC distribution site on 26 February.
- In the ongoing MAM in communities programme (funded by WFP and implemented by Medair), 185 PLWs were provided with SuperCereal Plus at JHAS clinics.
- During February, 2,532 pregnant and lactating mothers reached with infant and young child feeding promotion and counselling through UNICEF/Save the Children Jordan (SCJ) Infant and Young Child Feeding (IYCF) centres in Za'atari, EJC camps and host community. In addition, 6,806 children under five and lactating mothers received nutritional snacks during the reporting period.

## Secondary and tertiary care

- Qatari Red Crescent continue their programme for secondary and tertiary care for war wounded. They have a medical team of three doctors covering 24 hours in Ramtha hospital emergency and refer to contracted hospitals in Amman – Islamic Hospital, Dar al Salam and Shami Hospital (for eye surgery). QRC also support 20 renal dialysis patients from Zaatari camp

## Mental Health

- Bright Future: began working 2 months ago in collaboration with MmM in Za'atari camp, providing interventions related to counseling, coping skills, parental counseling, domestic violence, awareness activities, and social visits. They provide the same services in Amman, in addition to activities targeting students and persons with disabilities.