



Situation Overview

In December, 30 new COVID-19 confirmed cases and 80 recoveries were reported. The total number of confirmed reported cases in Azraq camp since the start of the pandemic is 573 cases of which 557 cases have been recovered and 01 death has been reported. As such, the current active COVID-19 cases in Azraq Camp are 15.

Concerns: Refugees returning to the Camp are one of the main concerns; 111 (19.37%) of the COVID-19 confirmed cases in Azraq camp are returnees. While, IBVs are 76 (13.26%). Moreover, refugees from the camp who move in and out of camp informally continue to be the main threat for the Camp residents.

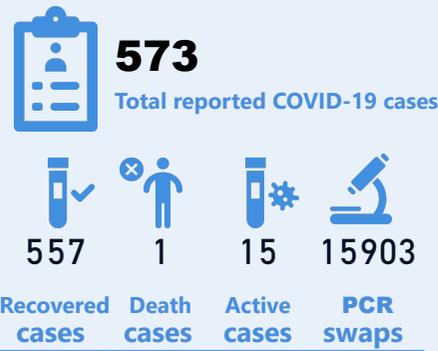
Suppression: The following measures supported in combating the spread of COVID-19 virus in Azraq Camp:

- * Interagency coordination with Authorities coupled with commitment and dedication.
- * Communication with Community and the adherence to the preventive measures, such as PPEs, the distribution of hygiene materials and maintaining social distance at Distribution Centers.
- * Temperature screening at the entry points and PCR tests for returnees.
- * Active surveillance and contact tracing by MoH and Health Partners.
- * Isolation of direct contact until the result of the PCR swabs are released and refugees' compliance.
- * Duty delivery of Assistance and Services to the Isolated Areas.
- * Strict follow ups by the Authorities.

Preparation for Second Wave: In preparation for the second COVID-19 wave, (i) the contingency plan was updated, (ii) the Isolation Area was upgraded and enhanced with 101 shelters to accommodate the positive cases and (iii) 50 beds 'Corona Treatment Center' was approved by MoH and is operational in the Camp.

Preparation for COVID-19 Vaccination: Ministry of Health (MoH) and the Crisis Management have approved for the COVID19 vaccination to be conducted at the Corona Treatment Center. For that purpose, 3,167 refugee patients with NCDs in Azraq Camp and Healths Care Workers will be prioritized.

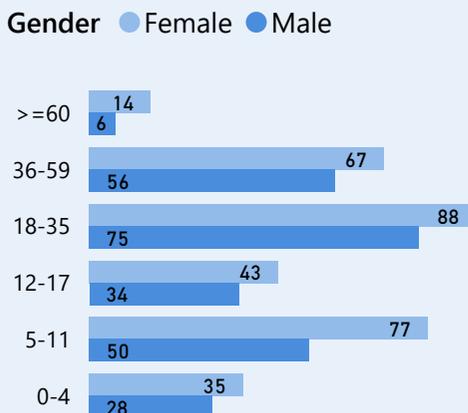
Number of COVID-19 Cases, Death and Recoveries in Azraq Camp



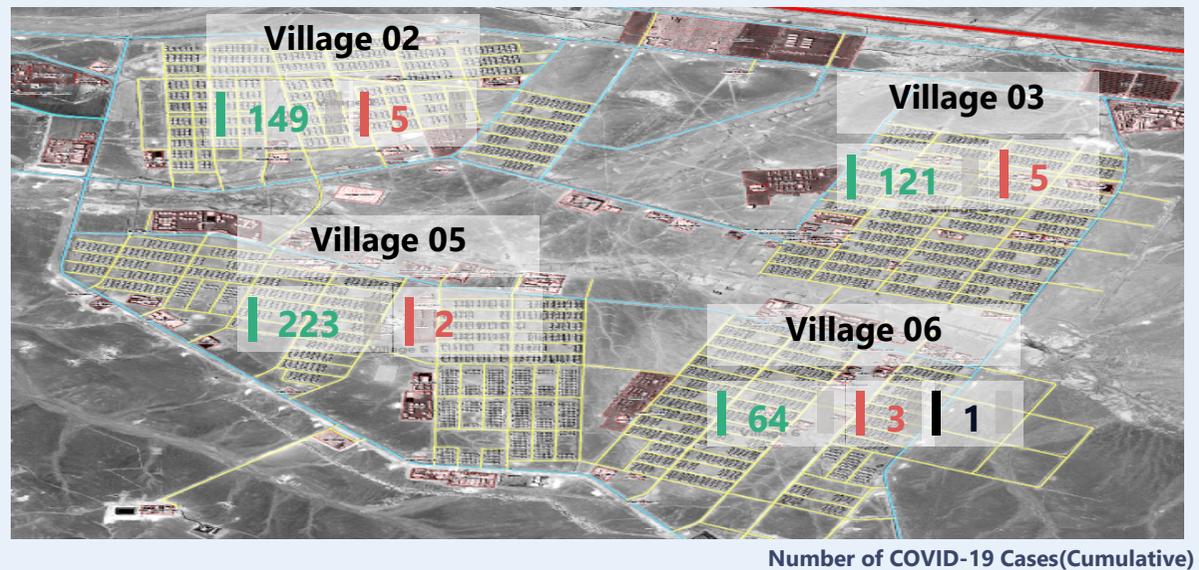
COVID-19 Cases by Sex and Age



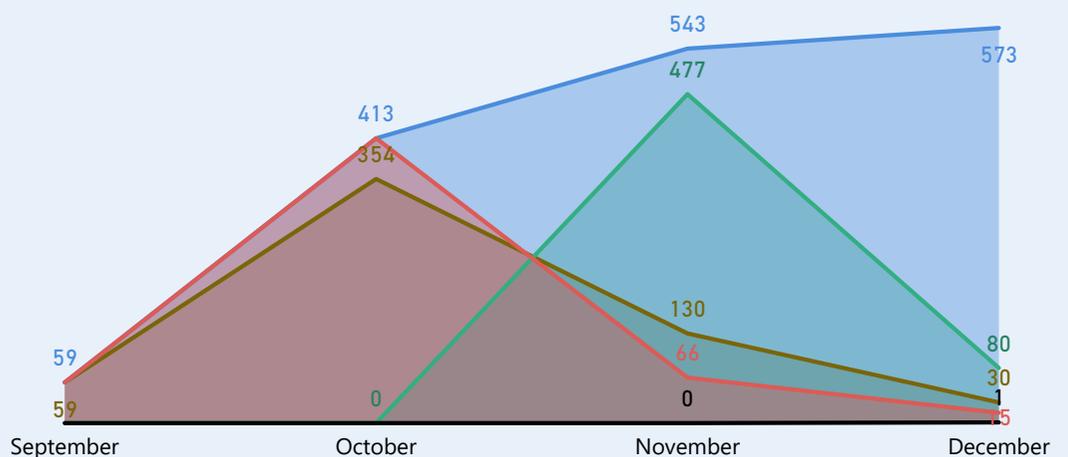
Reported cases by Age



COVID-19 cases by Village



Legend: New Cases (Yellow), Recovered Cases (Green), Death Cases (Black), Confirmed cases (Blue), Active cases (Red)



Preparation, Prevention and Response

* During lockdown, between April 1st and 31st July, FO Azraq introduced the Public area intended to be used as the Quarantine area for refugees returning to the camp. Prior to entry, temperature screening and PCR swabs were collected at the entry gate. Refugees were allowed to proceed to their shelters two weeks later in strict observation of the Ministry of Health (MOH) protocols. In total, 859 Returnees have stayed in the Quarantine Site for 14 days prior to their proceeding to their respective shelters.

* During gradual reopening of camp, refugees who were out of the Camp were advised to remain at their whereabouts; more than 2,000 individuals have benefited from COVID-19 cash assistance. Those choosing to return were subjected to temperature screening, PCR swabs prior proceeding to their Shelters.

* In line with MOH directives, random PCR swabs collection were introduced across all the villages. This was done under the leadership of MOH and 52 Staffing from Health Partners. In total, 15,903 PCR swabs/tests were collected.

* Minimum standards for resumption of services were developed in consultation with operational partners and agreed upon. The SOPs details requirement of personal protection equipment (PPEs); face masks, sanitizers, gloves, sterilization and maintaining social distance.

Identification and Treatment

* As per MOH directives, those identified to be positive were sent to the Dead Sea isolation Area. With the Subsequent change in MOH policy, home-based isolation was introduced in Azraq Camp, as well.

* Active surveillance, contact tracing and elective testing were conducted by MOH Staff; accordingly, identified plots (11 shelters per plot) were put under isolation. In total, 235 Plots / 8,415 individuals were under home-based isolation in their shelters.

Service Provision

* WFP through NRC provided food baskets and bread to plots under isolation.

* Water tanks were provided at plot level to avoid crowding and local transmission.

* UNICEF distributed hygiene kits and learning materials to children.

* Those with need for medical attention were referred to IMC Hospital.

* UNHCR & Partners hotlines remained available to address protection needs/ gaps in service provision.

Public/Isolation Area

* The Public area was enhanced to serve the confirmed positive cases, and 101 shelters were constructed with its facilities: connected with electricity, heaters, private latrines, water-taps, TVs for the children to pursue their remote education.

Corona Treatment Centre

* The 50 beds Centre was approved by MOH and is in compliance with WHO for Acute Respiratory Infections Centre with sections for medical Staff and to receive patients who will require medical treatment.

* The Centre serves as clinical care to COVID-19 patients and to support home-based care for individuals with mild COVID-19 symptoms.

* In addition to, the Centre will serve as COVID-19 vaccination zone in which activities will be done in line with the Kingdom of Jordan's Strategy.

Challenges

* Adherence to physical distance was a challenge especially at Bread Distributions Points.

* Refugees returning to the camp both formal and informal means were testing positive.

* IBVs were testing positive further leading to closure of facilities and activities.

* Activities which entailed gathering were suspended for a prolonged period.

* Suspension of leave/work permit.

Good Practices

* Round the clock presence to uphold UNHCR's Stay & Deliver. Staff were put on a rotational basis to ensure their physical and health wellbeing and maintenance of minimal number on ground.

* Mass distribution of face masks and gloves at the Common Humanitarian Distribution.

* Guidelines for distribution were established; accordingly, PPEs were distributed to refugees approaching the Sites. These arrangements are in line with minimum standard SOPs for the resumption of activities.

* Swift establishment of the isolation area helped contain the local transmission within the camp.