

Health Sector Bi-weekly Report

Week 5 HIS Zaatari
Report Date 15th February 2014

1. Operational Highlights and Situation update

- 23 polio cases confirmed in Syria. Planning underway for the next Polio campaign in Jordan which will be held from 2nd to 6th March .
- Azraq camp will open the 3rd week of March.
- Verification process (biometric registration, issuance of proof of registration certificates, new ration cards and MOI services cards and return of identification documents) began in Zaatari on 27th of January. The opportunity is being taken to distribute health booklets with photo to record all consultations to reduce duplication at clinics, and conduct MUAC screening and routine vaccination catch-up in under fives and tetanus toxoid vaccination for women of reproductive age.
- In Irbid Governorate 15,815 health services were provided to Syrians in public primary health centres in January
- Ministry of Health with the support of WHO/Jordan has begun creating weekly epidemiological bulletins

2. Population

Total Syrian persons of concern in Jordan are 598,286.

Total active Syrians registered with UNHCR in Jordan	598,286
Number of Syrians waiting to be registered with UNHCR	0
Number of persons collecting WFP ration in Zaatari*	96,104
Number registered in Emirati Jordanian Camp as of 8 Feb 2014	3,831

* As of second distribution cycle in January 2014

3. Coordination and Assessments

- The monthly Health Coordination Meeting was held on 30th January. **Main outcomes** included: 1. Agreed to form a Health Sector Steering Committee for the humanitarian sector comprising Ministry of Health, key UN agencies NGOs, and at least one donor. 2. Agreed to form a Non-Communicable Diseases Task Force. 3. Results from the Jordan Valley Assessment, IMC's Assessment of Health Care Access for out of camp refugees and WHO/IMC's Mental Health Assessment will be presented in a half-day session towards the end of February.
- The first Non-Communicable Diseases (NCD) Task Force meeting was held on 3rd February with a follow up meeting on the 10th. These were co-chaired

- by MoH and WHO, and attended by a total of nine organisations. 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. **Main outcomes.** 1. Review of secondary data on NCDs in Syria and Jordan will be done. 2. Ministry of Health will share available clinical management guidelines and drugs lists
- A meeting was held on 13th February at UNHCR between the Health and Cash sectors to discuss cash assistance being distributed for medical purposes. **Main outcomes:** 1. Health conditions and disability can be used as vulnerability criteria when determining the need for cash assistance. 2. Cash should ideally only be used to provide access to health care in conjunction with UNHCR health unit to avoid duplication and disbursement of cash for treatment that would otherwise be covered by the national health system or NGOs.
 - Following a rise in the number neonatal deaths in Zaatri during December, UNFPA, UNHCR and UNICEF conducted a maternal and neonatal facility assessment at UNFPA/JHAS clinics and MFH in Zaatari, as well as the Mafraq Gynecological and Paediatric hospital. **Main findings:** In each of the 3 delivery facilities, there are skilled staff present 24 hours, 7 days a week. All 3 facilities are able to provide neonatal resuscitation, parenteral administration of antibiotics, oxytocics and anti-hypertensive drugs. Antenatal care is available in the 3 facilities but essential evidence-based interventions (blood pressure check, iron and folate, syphilis screening and tetanus vaccination) are not provided systematically. None of the 3 facilities practice Kangaroo Mother Care (KMC); the 3 facilities are well equipped with essential newborn corner devices but one facility did not have a resuscitation table with heat source; one facility did not use partographs to monitor the progress of labour; corticosteroids in management of preterm labour are not always used when indicated; none of the facilities were had policies or practices to promote early initiation of breastfeeding. Recommendations and action plan will be developed.
 - Mafraq Health Coordination meeting held on the 5th February. **Main highlights.** Referral feedback between Mafraq hospitals and Zaatri has improved; Cisco Clinic Telemedicine facilities at Mafraq Hospital can be extended to refugees; Emirati hospital and Islamic clinic report increased cases of scabies and lice.

4. New arrivals

- WFP has started distributing high energy rice and wheat bars (IK A-28 and IK A-29, respectively) in coordination with IOM, for refugees arriving at Rabaa Al Sarhan. A 500g package contains nine bars, provides 2,250 kcal meets energy needs for a 24-hour period. Each new arrival will get 500grams. They

can be crumbled and dissolved in water for consumption by infants/young children.

- From 22nd January to 4th February IOM medical team funded by UNHCR and supported by UNICEF and MoH vaccinated 2,305 new arrivals against polio, 3,231 against measles and 917 were provided with Vitamin A supplements. UNICEF provided one additional fridge for the IOM vaccination team at Raba Sarhan.
- During the same period, IOM provided health checks for 4,408 Syrian refugees upon arrival in Raba Sarhan; 126 individuals with medical conditions requiring immediate referral or treatment were referred to JHAS in Raba Sarhan and 572 individuals with non-urgent medical conditions were referred to the camp health clinics.

5. Health services

Urban

- In Irbid Governorate 15,815 health services were provided to Syrians in public health centers in January while 4,293 outpatient services were provided to Syrians in governmental hospitals the majority being in Princess Basma Hospital (1844). 2,538 Syrians were seen in the emergency rooms of governmental hospitals with the majority being in Princess Rahma Hospital (726); 678 Syrians were admitted to governmental hospitals in Irbid with the majority in Princess Badeea Hospital (232) and 166 surgeries were provided to Syrians in governmental hospitals in Irbid with the majority in Princess Badea Hospital (90).
- Between January 26th and February 6th IMC Mobile Medical teams visited 14 areas in Jordan including Irbid (Zoubya, Thnaibeh, Al Mansoura); Jerash (Souf, Jerash City); Amman (Sahab, Marka, Muqabalain); Madaba; Zarqa (Rusayfa, Al Azraq); Balqa (Der Allah) and Mafraq (Al Manshiyyeh, Al Hamra) during which 2,296 consultations were provided. Of these 1,522 (66.3%) were female; 774 (33.7%) were male; 897 (39.1%) were Syrian; 1,344 (58.6%) were Jordanian; 53 (2.3%) were other nationalities; 339 (14.8%) were under 5, 670 (29.2%) were 5-15, 1271 (55.3%) were over 15. The most common morbidities included Upper and Lower Respiratory Tract Infection and vaginitis.

Azraq

- Azraq camp will open the 3rd week of March.

Zaatari

- UNHCR in collaboration with MoH and CDC Atlanta has established sentinel sites for laboratory-based diarrhea surveillance in Zaatari camp. Sample collection will be done at MDM clinic 2 and MFH. Initial processing and culture will be done in Mafraq Public Health laboratory. Central Public Health Laboratory will provide higher level analysis, training, follow-up and support

to the laboratory and will help generate written reports of results. The purpose of this project is to monitor the pathogens associated with diarrhoea among children and adults.

- A four-day Integrated Management Childhood Illnesses (IMCI) training took place in Zaatari camp from 3rd - 6th February supported by UNICEF. Seven doctors (4 from JHAS, 3 from MDM clinic and 1 from Saudi clinic) were trained. The training took place in 2 clinics in the camp (JHAS and MDM) and included theoretical training, video sessions and clinical sessions with patients.
- Five oral rehydration corners continue in the camp and between 1st to 6th of February 25 children (13 girls, 12 boys) under 2 years old and 39 (19 girls, 20 boys) aged 2–5 years were rehydrated at the corners; 27 children (14 girls, 13 boys) under 2 years old and 42 (21 girls, 21 boys) aged 2–5 years old received ORS for use at home: One boy under the age of two years old was referred to a camp clinic from an ORT corner for further management.
- Rat baiting campaign completed in January; over 3000 dead rats were collected after the campaign. A second campaign was conducted first week of February. Initial cases of accidental ingestion in children were noted during the first campaign but no serious effects. During the second campaign there were no cases of accidental ingestion reported after repeated widespread messaging and additional safety measures (avoiding placing bait under raised caravans which could be accessed by children).

6. Immunization

- During the verification process in Zaatri from 1st–6th February, 155 women (75 pregnant, 80 non-pregnant) received TT-1 vaccine, and another 202 (97 pregnant, 105 non-pregnant) received TT+2 vaccines. During the same period, 549 children (266 girls, 283 boys) between the ages of 1–18 months received routine EPI. The ongoing verification process is a very good opportunity to identify and vaccinate 18-month-old children who have missed previous vaccinations.
- MoH/ UNICEF/WHO/UNHCR and partners have started the preparation for the third round of Polio NID for children aged 0-5 years from 2nd to 6th of March. Current status of preparations is as follows:
 - Communication action plan finalized and implementation started.
 - IEC materials ready for distribution and TV/Radio will start dissemination of the messages one week prior to the NID
 - Microplans will be revised by next week based on the lessons learned during the previous two rounds of Polio NIDs.
 - Greater attention will be on outreach and a mobile team approach to reach remote and hard-to-reach populations

- Training and orientation workshops for health promoters from governorates conducted at national level; governorate level is continuing
- Two coordination meetings on March Polio NIDs awareness with 42 NGOs and CBOs have been conducted jointly by MoH, UNHCR, WHO and UNICEF

7. Communicable diseases and outbreak prone diseases

- Ministry of Health with the support of WHO/Jordan has begun creating weekly epidemiological bulletins which highlight the key health related issues that have arisen in Jordan in the previous week. <http://www.emro.who.int/jor/jordan-infocus/weeklybulletin.html>

8. Tuberculosis

- From 22nd January to 4th February 2014 IOM medical team funded by UNHCR delivered TB awareness sessions for 5,191 refugees and members from the host community. During the same period, 4,609 refugees (53 per cent males, 47 percent females) were screened for TB.
- No new TB cases during the reporting period. The total number of TB cases remains at 98; 69 pulmonary TB including 3 MDR cases and 29 extrapulmonary.

9. Reproductive health

- In October 2013, a neonatal death audit process was established in Zaatari camp by UNHCR and MoH with the help of the Centres for Disease Control. So far, 15 neonatal death audits have been conducted and analysed. The results of the audit showed that 13% of deaths happened in the camp and 87 % happened in hospitals outside the camp. The average age of death was 3 days and 14 hours. The underlying causes of neonatal deaths were: 60% due to prematurity and its related complication of Respiratory Distress Syndrome; 20% associated with congenital abnormalities and 20% due to septicaemia.
- 125 UNICEF newborn baby health kits and 124 mother kits were distributed to newborn babies and their mothers following delivery in Za'atari camp MFH and JHAS clinics in January 2014.
- UNFPA/Aman will open a new clinic in Al Nasser, a highly populated and low income area of eastern Amman. Un Pont Per /Jordan Women's Union (UPP/JWU) now have four clinics (Amman, Zarqa, Irbid and Mafraq). The clinics provide integrated RH services, including antenatal and postnatal care, clinical management of sexual violence, family planning, STIs management, breast clinical exam and RH awareness.

- Institute of Family Health/ Nour Al Hussien Foundation (IFH/NHF) static clinic providing integrated RH services in middle Jordan valley is supported by a mobile clinic in Northern Jordan valley to expand access to the population.
- In Zaatari, a new gynecologist has joined the Saudi Clinic and is available three days a week (Sunday, Monday and Thursday). A new midwife was also hired at the MDM clinic.

10. Nutrition

- Following official approval by the Jordan Food and Drug Association (JFDA), WFP, through partner Medair, officially launched a nutrition programme for the treatment of Moderate Acute Malnutrition (MAM) in Syrian refugee children under the age of five and pregnant and lactating mothers residing in out-of-camp settings on 26th January in Mafraq, Ramtha, Irbid, Zarqa and Amman. Implementation in Zaatari camp with Save the Children Jordan will begin in February. The product used will be Supercereal.
- During January, 3,875 pregnant and lactating mothers were reached with infant and young child feeding (IYCF) promotion and counselling through UNICEF/Save the Children Jordan (SCJ) IYCF centres in Za'atari, EJC camps and the host community. In addition, 15,731 children under five and lactating mothers received nutritional snacks during the reporting period.
- A three-day training workshop on IYCF for 12 midwives working at the MoH clinics in Amman was conducted from 2nd – 5th February by SCJ, under direct supervision of MoH/UNICEF.
- In Zaatri WFP continues to distribute rice, bulgur, lentils and salt and a nine JD food voucher to be redeemed at supermarkets in the camp. It is expected that by the end of March the in-kind food distribution will be replaced completely by food vouchers.

11. Secondary and tertiary care

- Exceptional Care Committee took place on 29th and 30th January at UNHCR. A total of 313 cases were reviewed. 162 emergencies, and 126 non-emergencies.