Weekly Report Public Health and Nutrition Za'atri Camp Report Date March 22nd 2013 HIS Week 11

1. Operational Highlights and Situation update

- One suspected measles case reported from Za'atri in a 23 year old woman; serology results awaited.
- The French Hospital team in Za'atri vaccinated the 25,000th child during the week.
- Ministry of Health has agreed to a mass vaccination campaign against measles and polio in Za'atri starting the 13th of April and in refugees in host community starting 27th of April.
- The Interagency Working Group in Reproductive Health completed the MISP assessment in Za'atri and Irbid with a team of four consultants from Women's Refugee Commission, CDC, Boston University and UNFPA.
- Distribution of micronutrient fortified porridge started in Za'atri supported by UNHCR, UNICEF and Save the Children Jordan to all children 6 to 23 months in an efforts to strengthen complementary feeding

2. Population

The refugee influx continues with total active registered Syrians in Jordan 306,556 and 32, 143 new arrivals between the 1st and 20th of March (Table 1). The current average is 2,177 arrivals per day.

Table 1:

Total active Syrians registered with UNHCR in Jordan	306,556
Number of Syrians waiting to be registered with UNHCR	56,475
Number registered in Za'atri as of March 20th	167,623
Number of new arrivals between March 1st to 20th	32, 143

^{*}These statistics are based on active registrations in the UNHCR database. Users are cautioned that the actual population is subject to uncertainties including but not limited to incomplete camp departure information and other variables. UNHCR and its partners are implementing measures that will improve the registration accuracy. Updates will be provided on a regular basis.

^{**}This figure represents the arrival figure as recorded by IOM. IOM collects people of concern from the border and brings them to the UNHCR reception center. Note that NOT ALL those persons do then register with UNHCR.

3. Coordination

- Health Coordination meetings held in Za'atri on the 18th and 21st of March
 co- chaired by Ministry of Health and UNHCR. Main outcomes: Due to recent
 inaccurate reporting on health situation in the camp agencies asked to direct
 all media enquiries to Ministry of Health; the camp health strategy should
 involve the community and Syrian ancillary health personnel to ensure
 rumours and misconceptions are addressed quickly.
- Nutrition Working group met on the 19th of March. Main outcomes: need to seek local solutions for therapeutic nutritional products e.g. local versions of F75 and F100 and ready to use therapeutic food whilst waiting for approval to import; agreement reached on content of letter to Minister of Health on expediting approval of nutritional and related products with annex of products; nutrition objective of Regional Response Plan reviewed.

4. Mortality and Morbidity

- Crude and under five mortality rates stable
- Neonatal mortality raised at 36.4 per 1000 livebirths¹ (standard is less than 16) with two neonatal deaths reported but may be related to lower than usual number of deliveries reported.

5. New arrivals

- From 13 March 2013 until the 19 March 2013 IOM medical team provided health checks for Syrian refugees upon arrival to Za'atri camp for 12,284 individuals; IOM provided 104 individuals with medical conditions requiring immediate referral or treatment at the camp's health clinics as part of the transportation assistance services.
- New arrivals disability reporting has increased to 6% of total arrivals as consequence of the introduction of the Handicap International triage card. During this week out of 72 card issued by JHAS triage team 13 attended Handicap clinic.

6. Communicable diseases and outbreak prone diseases

- Outbreak alert issued for measles serology pending and case finding enhanced
- Acute jaundice syndrome alert lifted

 $^{^{1}}$ Care should be taken in interpreting neonatal mortality rates n a weekly basis as fluctuations are to be expected

- UNICEF is coordinating with partners to organize a Measles catch-up campaign, to respond to both the measles outbreak in the region (Lebanon, Syria, Iraq) and the low measles coverage among refugees in Za'atari camp and host communities. UNICEF met the national EPI team at MoH on 17 March to discuss the first draft of the micro-plan. It was agreed to aim to vaccinate 50% of the total population which are under 15 of Za'atari camp and the high risk population in host communities against measles, while 20% will be covered against polio. 17.5% will receive vitamin A supplementation. UNICEF/WHO and MoH met again on 20 March and agreed to run the campaign in Za'atari from 13-18 April and in host communities from 27 April to 2 May. UNICEF is also in discussion with UNHCR and MoH to set up vaccination upon arrival in the camp and in registration centres in coordination with IOM.
- The ongoing vaccination of children under 15 against measles and polio continues through the French Field Hospital (FFH) in Za'atari camp, with vaccines provided by UNICEF/Ministry of Health (MoH). During this reporting period, the FFH vaccinated a total of 3,414 children against measles in the camp, through both regular and mobile vaccination sessions. Some 13,139 children have been vaccinated against measles since the beginning of the year. In total 24,241 children have been reached since the start of the programme in 2012.
- SCJ has continued the screening all children under five visiting the IYCF caravan to check their immunization status. Almost more than 50% were not vaccinated. These children were immediately referred to French Field Hospital for Measles and Polio vaccination and to MoH for routine EPI. The vaccination status of the referred children will be re-checked during their next visit to the IYCF caravan.

7. Tuberculosis

• From 13th March 2013 until 19th March 2013 IOM delivered TB awareness sessions for 1,892 refugees and screened for TB 12,528 refugees; one new cases was diagnosed during that time. The total number of TB cases is 41; after a meeting with MoH/National TB Programme, 13 cases were excluded from the total number of cases (41 instead of 54 cases) because it was agreed that any case that was diagnosed as TB in Syria and didn't continue/start the treatment in Jordan should not be considered in the total number of TB detected cases.

8. Reproductive health

- The Inter-agency Working Group on RH in Crises settings conducted an assessment and evaluation of the Minimum Initial Service Package (MISP) for reproductive health in Za'atri and Irbid this past week supported by UNFPA and UNHCR. 3 research tools were applied: Focus groups discussions in men and women according to different age groups (below 25 and 25-45), distance to Health facility (near, far) and new arrival (within three weeks or longer term refugees) for camps or registered refugees and unregistered refugees out of camp. Key informant interviews and facility checklist were also applied. Preliminary results will be presented on 24th of March.
- The new JHAS/UNFPA RH Unit will open on Sunday with a midwife to provide family planning services. When the area receives electricity normal delivery services will begin.

9. Food Security/ Nutrition

• The implementation of the Infant and Young Child Feeding (IYCF) programme continues in Za'atari, through UNICEF/Save the Children Jordan (SCJ). The programme includes breastfeeding promotion, complementary child feeding, one-to-one counselling and health education sessions for pregnant and lactating women. During the last week (16 - 20 March 2013), 726 mothers and 340 children under 5 visited the two IYCF caravans currently operational in the camp. A total of 59 lactating mothers attended one-to-one counseling sessions on breastfeeding. In addition, 1,123 children under five and lactating mothers received nutritional snacks. Each day, between 78 and 80 mothers attend the caravans.

10. Other updates

• The French Field Hospital surgical services will close at the end of the month. The FFH will keep a basic team for the next month to finalise post-surgery care to approximately 32 patients who need follow up. Solutions for the increased burden on both Moroccan Field Hospitals and Jordanian Hospitals are being proposed but no definitive action taken yet.